**KELLY:** Good morning, ladies and gentlemen. Welcome to the George W. Norris Legislative Chamber for the eighty-first day of the One Hundred Eighth Legislature, First Session. Our chaplain today is Pastor Rodney Hinrichs, a guest of Senator Clements. Please rise.

PASTOR HINRICHS: Good morning. Very glad to come and pray with you. I pray-- I have your picture on the wall and I pray daily for you all year long. I know you have agreed to work here and thank you very much. Let's pray. Father God, we thank you for these leaders of Nebraska. Bless them with minds of wisdom, give them your nature of peace, cover them with your Holy Spirit, that there may be a spirit of gentleness in this Chamber. Where there's contention, give them wisdom and understanding where there is strife. Break the spirit of division and bring your compassion that allows your love to cover a multitude of sins. Lord, these people are tired after serving long and hard. Give them your strength, bless their rest. Give them times of refreshing. You are the living God, fill these Chambers with your presence so that the abundance of work they desire to complete may be accomplished. Bless their conversations. Bless them with your wisdom. Bless them with your compassion. Bless them with your love. Fill this Chamber with a quiet and gentle spirit. Bless these leaders to serve their constituents so your will may be done in Nebraska. We serve a living God. Thank you for your wisdom. Thank you for your presence. Thank you for your love. In Jesus name, Amen.

KELLY: I recognize Senator Lowe for the Pledge of Allegiance.

**LOWE:** Please join with me in the Pledge of Allegiance. I pledge allegiance to the Flag of the United States of America, and to the Republic for which it stands, one Nation under God, indivisible, with liberty and justice for all.

**KELLY:** Thank you. I call to order the eighty-first day of the One Hundred Eighth Legislature, First Session. Senators, please record your presence. Roll call. Mr. Clerk, please record.

CLERK: There's a quorum present, Mr. President.

KELLY: Thank you, Mr. Clerk. Do you have any -- do you have any items?

CLERK: I have no corrections for the Journal at this time, Mr. President. Mr. President, I do have items. Report of registered lobbyists from 5/18/23 will be filed in the Journal. Additionally, agency reports electronically filed with the Legislature can be found

on the Nebraska Legislature's website. That's all I have this time, Mr. President.

**KELLY:** Mr. Clerk, please proceed to the-- Speaker Arch, you are recognized for an announcement.

ARCH: Thank you, Mr. President. Colleagues, in anticipation of today's debate of LB574 and based upon our previous rounds of debate on this bill, yesterday afternoon I met with Senators Briese, Conrad, and Vargas and our Clerk, Brandon, to consider ways to ensure protections for free expression and safety for all. A letter signed by the four of us has been distributed by the pages to each of you. Additionally, I will be emailing this letter out to all senators and legislative staff. This letter provides the recommendations to members and staff and the procedures we have directed the Clerk to take for this afternoon's debate to address both protections for free expression and safety for all. I ask each of you to please consider the recommendations we have provided. With respect to the safety provisions for all, please be sure you and your staff are aware of and follow them. These include the entrance and exits to be used, directions regarding staff on the floor, and actions with respect to decorum. In addition, you have also received a press release for the public regarding this afternoon's debate. After today, we have our final two weeks of session. We have two large General File bills to consider yet this session. Monday, we will begin with the debate of voter ID, followed by LB50, the justice reform bill. Both bills are on General File and we have nine days to complete all three rounds of debate on those very important measures. Additionally, next week I plan to address on Select File, LB727, the Revenue Committee's tax credit package. On Thursday, I intend to schedule the Final Reading debate of the tax and education bills. Thank you, Mr. President.

**KELLY:** Thank you, Speaker Arch. Senator Conrad, you're recognized to speak for an announcement.

CONRAD: Thank you, Mr. President, and good morning, colleagues. I have been asked to share a few words in regards to the meeting that was organized yesterday between Senator Briese, Speaker Arch, Senator Vargas, and myself. We wanted to work together constructively to learn lessons from past rounds of debate and other inflection points this session, knowing the gravity, significance, and importance of the measure before us this afternoon. So in order to anticipate potential procedural issues that may arise, we wanted to have a chance to set expectations and clear thinking together, to lead together even in the most challenging times on the most challenging issues, which is our

obligation and our duty as state senators to the people of Nebraska and in stewardship of this institution. I hope that each of us will be able to lead together and be examples and models for the public who hold strong and important viewpoints on the measures before us. And the reason I think it is more important than ever to lean in harder with more love and more leadership is because our beloved Nebraska deserves no less. The First Amendment is big enough to hold all of our viewpoints, the right to organize, the right to associate, the right to petition your government, and the right to speak. Nebraska is big enough for all of us, and we need to ensure, regardless of our deeply held personal beliefs on complex and controversial issues, that Nebraska is a place where everyone can belong. And no matter what happens today, we have to stay in relationship to fight for our fellow Nebraskans, to steward this institution, and because we're all committed to the belief that there is always, always hope for a better tomorrow. I thank the Speaker for his leadership, and I look forward to continuing our work together today and for the remaining session. Thank you, Mr. President.

KELLY: Thank you, Senator Conrad. Mr. Clerk, for items on the agenda.

CLERK: Mr. President, LB227A, Select File. I have no E&R amendment. Senator Machaela Cavanaugh would move to amend with FA150.

KELLY: Senator Machaela Cavanaugh, you're recognized to open.

M. CAVANAUGH: Thank you, Mr. President. Colleagues, this is Select File, got 30 minutes. It's your only 30 minutes before we get to Final so feel free to get up and roam. I get ten minutes to open and then two times to talk and then a close. You'd think I know all of this by now. Yeah, so 25 minutes on this. OK. I think this strikes Section 1, everything that I filed this morning strikes Section 1. It was the quickest thing because everything has a Section 1. So I just went ahead and struck Section 1. Today is -- today's the day. Today's the day. It's going to be a long day. It's going to be a hard day. It's probably going to be hard for most everyone in here. I walked in this morning from the parking lot and there was a big sign and there were some young people holding the sign. So I stopped and I talked to each one of them. And they are here in peaceful protest in dissent. I am not afraid of people who are here in peaceful protest. Whether they agree with me or disagree with me, they are not here to physically intimidate me. I have been afraid when people have been here in protest and it was not peaceful because they came in the hundreds with guns. But I did not hide. I did not ask for doors to be locked. I did not ask for lines to be moved, entrances to be cleared, exits to be

cleared. Because even though I was intimidated and I was scared when hundreds of people were here with guns to protest bills around gun regulations and I had a bill around gun regulations and white nationalists came and testified in opposition to my bill and sat behind me with guns, even all of that, nothing about how this place operates changed and nothing bad happened to me. And there were no announcements made, there were no statements issued, there were no doors locked. And the intention of showing up in the hundreds with guns is to intimidate. I was relieved that they just used their free speech, their freedom of expression and not violence. But I never thought that they needed to be removed. I did think that their guns were inappropriate, as did others who support First Amendment rights as I do, and Second Amendment rights as I do, thought that it was inappropriate that they brought guns in the hundreds. But no one, including myself, asked for them to be removed from the Capitol. So I'm disappointed. I'm disappointed I'm disappointed by the remarks that were made on Wednesday morning by Senator Moser insinuating that this was anything other than peaceful protest. I'm disappointed in the behavior of the body towards the citizens of this state who have come in peaceful protest. You are being confronted by people's raw pain because of what you are doing. I hope Senator Armendariz enjoys that pillow that I brought from my house. I was wondering what happened to it. I guess it's in her chair. Yeah. Sorry, just noticed that. It feels poetic just doing what you want and taking what you want and not asking questions about it. I actually had that pillow down here for when my staff member comes so that they have a comfortable place to sit-- thank you-- because I was wondering what happened to it. It's just -- yeah, it's just going to be a really hard day. It's going to be a really hard day. And I think vilifying the people who you are victimizing by acting like they are anything other than the citizens of this state that you are supposed to be representing, the citizens of the state that you are entrusted with making good decisions on their behalf, vilifying those people because they disagree with you is really disappointing. It's really, truly disappointing. How much time do I have left, Mr. President?

**KELLY:** 2:55.

M. CAVANAUGH: OK. Well, I have a lot that I plan on covering this morning, and it's all going to be about LB574. So I'm sure that there'll be people that get on the mike and say I'm going to take us back to the bill again at hand. Great. God bless. I'm going to talk about LB574. I'm going to talk about LB574 on this bill and the next bill and the next bill and the next week and we talk about whatever it is we're talking about, I'm going

to talk about LB574. On the voting rights bill, on the criminal justice bill, I'm going to talk about LB574. So there we go. Thank you, Mr. President. Oh, I'm next in the queue. All right. I was going to sit down because I just knew that somebody else was in the queue, but they got out of the queue. So now I'm next in the queue so I guess I'll just stay up here and keep talking. Great. The parable of the drowning man, also known as Two Boats and a Helicopter. OK, let's see here-- Mr. President, I'd like to just start on my next time.

KELLY: Senator Cavanaugh, you're recognized.

M. CAVANAUGH: Thank you, Mr. President. A storm descends on a small town, and the downpour soon turns into a flood. As the waters rise, the local preacher kneels in prayer on the church porch, surrounded by water. By and by, one of the townsfolk comes up the street in a canoe. Better get in, Preacher. The waters are rising fast. No, says the preacher. I have faith in the Lord. He will save me. Still, the waters rise. Now the preacher is up on the balcony, wringing his hands in supplication, when another guy zips up in a motorboat. Come on, Preacher. We need you -- we need to get you out of here. The levee's going to break any minute. Once again, the preacher is unmoved. I shall remain. The Lord will see me through. After a while the levee breaks, and the flood rushes over the church until only the steeple remains above water. The preacher is up there, clinging to the cross, when a helicopter descends out of the clouds, and a state trooper calls down to him through a megaphone. Grab the ladder, Preacher. This is your last chance. Once again, the preacher insists the Lord will deliver him. And, predictably, he drowns. A pious man, the preacher goes to heaven. After a while he gets an interview with God, and he asks the Almighty, Lord, I had unwavering faith in you. Why didn't you deliver me from that flood? God shakes his head. What do you want from me? I sent you two boats and a helicopter. The Lord sent you hundreds of people on February 8. The Lord sent you me. The Lord sent you Senator Hunt. The Lord sent you 16 Democrats. The Lord sent you balconies of people. The Lord sent you a Rotunda of masses. The Lord sent you letters from the business community. The Lord sent you letters from the religious community. The Lord sent you letters from families. The Lord sent you letters from doctors. The Lord has been sending you, colleagues, everything you need. The Lord has been quiding you and you have been ignoring the Lord. You start this morning off and every morning off with a prayer. But you do not open your hearts up to the Lord and their messages. You are ignoring all of it. The Lord sent you tweets from your own children on social media about how bad this is. And you tokenize those children of yours. The Lord is sending you message after message after message, and you are

ignoring the Lord. You are ignoring the Lord. I am a child of God. Whether you like it or not, I am a child of God. And you believe that. You pray about that. And the Lord has sent me to you. What is it going to take, colleagues, for you to listen to your Lord? What is it going to take for you to open your hearts and minds and love back the way that you are loved? What more can we do? We have been bringing you the Lord's message from the very beginning.

**KELLY:** One minute.

M. CAVANAUGH: Why won't you listen? I know I do talk about being Catholic, but I tend to not want to talk about things in this way because this is government. But I have thought about this and I have thought about this parable a lot. And I have wondered why you all have put the blinders on and refuse to see what the Lord has sent to you. All of the things that the Lord has sent to you, you refuse, you deny. And I have truly wondered why that is, so today when I have nothing left to lose and almost nothing left to give I ask you to listen to the Lord.

**KELLY:** That's your time, Senator Cavanaugh. Thank you, Senator Cavanaugh. Senator Hansen, you're recognized to speak.

HANSEN: Thank you, Mr. President. Pertaining to LB227A, it is the fiscal note for the Health and Human Services Committee priority bill. Just, at least, so everybody, everybody, at least, has an update on what we're discussing today on the underlying bill. And so it was a conglomeration of a bunch of bills put together from varying people that have to do with hospitals, that have to do with pharmacy, that have to do with SNAP benefits. And so just wanted to, at least, put that out there that's what the underlying bill is about, is the A bill for LB227. Thank you, Mr. President.

**KELLY:** Thank you, Senator Hansen. Senator Holdcroft, you're recognized to speak.

HOLDCROFT: Thank you, Mr. President. I rise in support of LB227 and opposed to the floor amendment. All right, this bill with amendment contains language from my bill, LB590, which was unanimously voted out of the Health and Human Services Committee on March 3. It would increase the personal needs allowance for qualifying individuals receiving Medicaid benefits from \$60 a month to \$75 a month. The last time the personal needs allowance was increased was with the passage of LB366 in 2015. After being amended, it increased the allowance then from \$50 to the current \$60 per month. According to the American

Council on Aging, a nursing home resident's personal needs allowance can be spent towards a variety of personal items and services not provided by the care facility, not provided by the care facility. These include clothing, shoes, vending machine snacks, specialty food, multivitamins, haircuts, toiletries, magazines, books, knitting needles and yarn, greeting cards, postage, and cell phone bills. These are things that are not provided by the care facility. AARP Nebraska, a proponent of LB590, believes that increasing the personal needs allowance will allow long-term care, assisted living, and other alternative-living residents the ability to better meet their personal needs and maintain a level of independence and dignity, combat isolation, and improve overall mental and physical health for our most vulnerable-- for our most vulnerable. It's the little things that add up. Many families help where and when they can, but not all families have that ability. Once again, colleagues, I appreciate your green vote on LB227. Thank you, Mr. President.

**KELLY:** Thank you, Senator Holdcroft. Senator Machaela Cavanaugh, you're recognized to speak. This is your last time before your close.

M. CAVANAUGH: My last time-- this-- oh, yep. Sorry, I forgot. Yeah, so if anybody wants to yield me time or else I'll just file another motion or motion to reconsider, whatever. Yes, there is a letter being circulated to ask everyone to sign and-- or a media release. So I'll just let the media know right now, you don't have to search for my name. It's not there. I'm not signing the letter. The people that are here in peaceful protest don't need to be told how to live their hearts. They don't need to be told by us how to communicate. They have used their voices peacefully and they will continue to use them peacefully and we don't have to tell them that. We just have to care and respect them. And we should listen to them. But a body such as this has no place in telling the people how to use their voice. So to the media, when the press release comes out and you look for my name, it's not there, my scribbled signature that's totally illegible. When the session started and I would write my name on things, I would always put my district number after it because my signature is so illegible that when you turn things in to the Clerk's staff, they have to, you know, when they file the motions or the amendments and everything, they have to sign the right person to it. And so I always would put my district number so that they would know who it was: 6, Cavanaugh, OK. I have signed so many things at this point that they know what my signature looks like. And it's messy and it's just a series of scribbles. It's a scribbled M, scribble, M, scribble, C, scribble, because my name is Machaela Melanie [PHONETIC] Cavanaugh. I have a really long name. I did not hyphenate, thought my name was long

enough as it was. My kids, their names aren't hyphenated either. Something my mother-in-law asked me about when we first got married and I didn't change my name. What will your kids' last names be? I said same as yours. Never really occurred to me to hyphenate their name or to use my last name for their last name. I don't know why. I mean, why not have the same last-- why not have Cavanaugh as their last name? I suppose we could have. I suppose we still could. I mean, they could all choose, my husband included, to change their last names. I would have a hard time with that, though, because then I'd have to relearn their last names. Like, wait, Nick, you're Cavanaugh now? All right, well, gosh, never known a Nick Cavanaugh before. Guess there's a first time for everything. There is-- well, that would be confusing because my son's name is Barrett, and my nephew's name is Barrett, and my nephew Barrett is Barrett Cavanaugh. Like the two judges, right? And my son then would be Barrett Cavanaugh also if he changed his name to Cavanaugh. And that would be confusing. Part of the reason that we call my son Barry is because of my nephew Barrett so that it's not confusing. When I was campaigning and Barrett was a newborn and I asked my nephew if he would drive me--

KELLY: One minute.

M. CAVANAUGH: --around and stay in the car with Barrett while I was knocking doors, and he did and I told my husband that Barrett was in the car. He said, he said is somebody driving you around? I said, yeah, Barrett's in the car and he said Barrett's in the car by himself? And I said, no, Barrett-- oh, yeah, no, big Barrett's in the car with little Barrett. Barrett's in the car with Barrett, so. Random memories. Random memories. OK, well, one minute and, and I see there's more people in the queue, I don't know if they're probably planning to talk or yield me time. Whatever. I guess I'll find out. Thank you.

**KELLY:** Thank you, Senator Cavanaugh. Senator Moser, you're recognized to speak.

MOSER: Thank you, Mr. President. Would Senator Hansen respond to a ques-- well, a few questions?

KELLY: Senator Hansen, will you yield to some questions?

HANSEN: Yes.

MOSER: So I was kind of looking through LB227, and your name is listed as the lead name so that's how I picked on you here. But how many bills are in this, approximately?

HANSEN: About 22, 23.

MOSER: Wow. And are-- you have at least one of these bills is yours or--

HANSEN: Yeah, I believe I have a couple in here. I have LB227, which is, which is my bill that we used as the vehicle for a lot of these that has to do with the state to provide Medicaid reimbursement to a hospital at 100 percent of the statewide average nursing facility per diem rate for an individual. So basically, what's happening right now, if I may elaborate, Senator Moser?

MOSER: Sure.

HANSEN: The hospitals are kind of getting stuck with the bill here. So what's going on is we're having a difficult time in the state of Nebraska placing certain patients in post-acute or long-term care facilities who are in hospitals right now. So somebody who is in a hospital and they're ready to be released from a hospital typically will go to one of those facilities if they need to. And right now, there's nowhere available for them to go. And so now the hospital is stuck paying for that patient, you know, sitting there in the hospital. So this would actually help reimburse the hospital at 100 percent of the average nursing facility per diem rate for an individual. We were talking about doing a-- they, they wanted 150 percent, we lowered that down to 100 percent and no longer requires inpatient care and discharge planning, requires nursing facility level of care upon discharge, and is unable to be transferred to a nursing facility and has been approved for a guardianship. So it's-- this, along with a few other bills as well, are trying to deal with that, that problem we're having right now in Nebraska about placing patients from hospitals into, into the next facility that they may need to go to.

MOSER: So how, how did we arrive at having so many bills Christmas "treed" into one bill?

HANSEN: A lot of it I think we were— because of time limits that we have this year. Like, I know Senator Conrad and others have alluded to the fact that we're kind of in a unique position this year, that typically a Christmas tree bill like this or an omnibus bill would not have this many in it. We would have a consent calendar, where a lot of these bills that are in LB227 are more consent calendar-type bills with no fiscal note, they came out of committee, you know, 8-0, no opposition. And so a lot of these would typically go into the consent

calendar. But right now we're just trying to find a home for some of these bills. Some of them are just simple language changes that have no fiscal note at all. Some are different. And so these are important bills, I think, in just for statutory changes and, and for other reasons. And so that's how we came to this amount of bills in LB227, along with some of the other committee priority bills, which I might add, I think mine is one of the least amount of bills in the committee priority bills. So it's probably one of the best ones out there.

MOSER: I'm sure if it's yours, it's good, huh? The fiscal note, though, is \$6 million in General Funds, \$2,500,000 in federal funds. Which of the bills spend the most money without having to--

HANSEN: You're going to make me pick on somebody?

MOSER: Yeah, no, not necessarily. But I'm just curious. I think the cause is good. I'm just curious about which bills were the most expensive.

HANSEN: Yeah, there's, there's different-- like I said, a lot of these have no fiscal impact. Some are, I know, that are a little bit more significant. Mine, LB227, along with LB123 was minimal, Senator Holdcroft's bill that he just got up and talked about,--

**KELLY:** One minute.

HANSEN: --Senator Walz's bill, and so-- and Senator Hughes's bill. Some of these are the ones that do incorporate the, the fiscal impact, but I think just because there are so many bills put together they kind of add up.

MOSER: OK. Thank you for your answers. I appreciate that. Helps understand the bill. Thank you, Mr. President.

**KELLY:** Thank you, Senator Moser. Senator Raybould, you're recognized to speak.

RAYBOULD: Thank you, Mr. President. Good morning, colleagues, and good morning, fellow Nebraskans out there watching us on TV. Normally, I, I don't take up a subject and I try to, I try to be as, as positive and discuss the issue in front of us. But sometimes my big concern is I'm a freshman senator, I'm a rookie, and I get blocked out on punching in. I don't think I would succeed in jeopardy. But, you know, I do want to talk about LB574 and the mash-up bill. And I know many of us are being bombarded by emails from physicians, psychiatrists, and from really concerned families that we represent. And I just want to read

one letter from a psychiatrist who's reached out to me that I have had the opportunity to sit next to, and this is, this is what she wrote yesterday. She calls it a tale of two cultures: This week has been a week of stark contrast, two societies dissimilar yet united. Nebraska and New York are on opposite trajectories. Two doctors with opposing lives, one begins his career and another nears her retirement. She is a psychiatrist. The perfect recipe for a roller coaster of highs and lows. Yesterday, I was moved to tears as my oldest son crossed the stage, accepted his diploma, and graduated from NYU Medical School. The pinnacle of his education was brought to a close. On to the next chapter. I listened as the keynote speaker instructed the new doctors. Their young, fresh faces beamed up at him. They were challenged to rise above typical human shortcomings, greed, apathy, exhaustion, fear, politics, to dedicate their lives to the service of the less fortunate, the forgotten, the marginalized in our society. The speaker outlined the challenges these wet-behind-the-ears doctors have already faced during their education: a global pandemic, increasing racial injustice, denial of reproductive rights and healthcare rights to transgendered individuals. All conflicts that they had never anticipated nor agreed to take on. Yet here they are, with the burdens of these conflicts now dumped into their laps. They are forced with the seemingly impossible task of finding a resolution. Not 24 hours earlier, I sat in my Manhattan hotel room and live-streamed the Nebraska Unicameral LB574 debate online. I wept as I watched with horror as Nebraska senators agreed to advance a bill which simultaneously imposes unfair and unwanted healthcare restrictions for reproductive rights and transgendered rights. These senators insisted their task was to protect children, yet their celebratory sneers, slaps on the back, handshakes and high fives told a different story. I wept for the cruelty I observed, and even more so for the joy their cruelty provided them. Two divergent and simultaneously colliding cultures, one seeking compassion for the sake of humanity, another seeking division for the sake of power. I am in agony. How will this ever expanding canyon be repaired? I left the auditorium of my son's graduation with the stark awareness that we now live in two worlds, growing further apart by the minute. My son is the future, the hope, the promise. I'm the past, the anger, the despair. Reluctantly, I will return to Nebraska and face the anguish caused by my government. I will console my desperate patients.

KELLY: One minute.

RAYBOULD: I-- thank you-- I will find a way to help them exist in a community that doesn't value their existence enough to protect them. I will hide my fear that this is only the beginning of much more pain

yet to come. But I will not hide my agony. The disparate cultures that now exist in our country mean my son will never come back to Nebraska to practice medicine. Despite soon becoming a board-certified internal medicine doctor like his father, my husband, they will never practice together in our state. I mourn the loss of lives my son could have saved. Despite his tremendous talent, accomplishments and genius, our government has spoken. They don't want doctors like him: doctors who value human rights over politics and compassion over power. Nebraska doesn't deserve him anyway. Our cultures are too far apart. Thank you, Mr. President.

**KELLY:** Thank you, Senator Raybould. Mr. Clerk, you have a motion on your desk?

**CLERK:** I do, Mr. President, Senator Hansen would move to invoke cloture on LB227A pursuant to Rule 7, Section 10.

KELLY: Senator Hansen, for what, for what purpose do you rise?

HANSEN: Invoke cloture.

**KELLY:** There's been a request for a call of the house. The question is, shall the house go under call? All those in favor— all those senators in favor vote aye; all those opposed vote nay. Record. Mr. Clerk.

CLERK: 28 ayes, 2 mays to place the house under call.

KELLY: The house is under call. Senators, please record your presence. Those unexcused senators outside the Chamber, please return to the Chamber and record— and return to the Chamber and record your presence. All unauthorized personnel, please leave the floor. The house is under call. All unexcused members are present. Members, the first vote is on the motion to invoke cloture. All those— oh, there was a request for a roll call vote. Mr. Clerk.

CLERK: Senator Aguilar voting yes. Senator Albrecht voting yes. Senator Arch voting yes. Senator Armendariz voting yes. Senator Ballard voting yes. Senator Blood voting yes. Senator Bosn voting yes. Senator Bostar. Senator Bostelman voting yes. Senator Brandt voting yes. Senator Brewer voting yes. Senator Briese voting yes. Senator John Cavanaugh. Senator Machaela Cavanaugh voting yes. Senator Clements voting yes. Senator Conrad voting yes. Senator Day. Senator DeBoer voting yes. Senator DeKay voting yes. Senator Dorn voting yes. Senator Dover. Senator Dungan. Senator Fredrickson voting yes. Senator Halloran voting yes. Senator Hardin voting

yes. Senator Holdcroft voting yes. Senator Hughes voting yes. Senator Hunt voting no. Senator Ibach voting yes. Senator Jacobson voting yes. Senator Kauth voting yes. Senator Linehan voting yes. Senator Lippincott voting yes. Senator Lowe voting yes. Senator McDonnell voting yes. Senator McKinney voting yes. Senator Moser voting yes. Senator Murman voting yes. Senator Raybould voting yes. Senator Riepe voting yes. Senator Sanders voting yes. Senator Slama. Senator Vargas voting yes. Senator von Gillern voting yes. Senator Walz voting yes. Senator Wayne. Senator Wishart—Senator Wishart voting yes. Senator Erdman—Senator Erdman voting yes. 41 ayes, 1 nay, Mr. President, on the motion to invoke cloture.

**KELLY:** Cloture is invoked. The next question is the adoption of FA150. Request for a roll call vote. Mr. Clerk.

CLERK: Senator Aguilar voting no. Senator Albrecht voting no. Senator Arch voting no. Senator Armendariz voting no. Sander Ballard voting no. Senator Blood voting no. Senator Bosn voting no. Senator Bostar. Senator Bostelman voting no. Senator Brandt voting no. Senator Brewer voting no. Senator Briese voting no. Senator John Cavanaugh. Senator Machaela Cavanaugh voting no. Senator Clements voting no. Senator Conrad voting no. Senator Day. Senator DeBoer voting no. Senator DeKay voting no. Senator Dorn voting no. Senator Dover. Senator Dungan. Senator Erdman voting yes-- Senator, Senator Erdman voting no. Senator Fredrickson voting no. Senator Halloran voting no. Senator Hansen voting no. Senator Hardin voting no. Senator Holdcroft voting no. Senator Hughes voting no. Senator Hunt not voting. Senator Ibach voting no. Senator Jacobson voting no. Senator Kauth voting no. Senator Linehan voting no. Senator Lippincott voting no. Senator Lowe voting no. Senator McDonnell voting no. Senator McKinney voting no. Senator Moser voting no. Senator Murman voting no. Senator Raybould voting no. Senator Riepe voting no. Senator Sanders voting no. Senator Slama. Senator Vargas voting no. Senator von Gillern voting no. Senator Walz voting no. Senator Wayne. Senator Wishart voting no. Vote is 0 ayes, 41 nays, Mr. President, on adoption of the amendment.

**KELLY:** The FA150 is not adopted. Senator Ballard, you're recognized for a motion.

**BALLARD:** Mr. President, I move that LB227A be advanced to E&R for engrossing.

**KELLY:** The question is the advancement of LB227A to E&R Engrossing. There's been a request for a roll call vote. Mr. Clerk.

CLERK: Senator Aguilar voting yes. Senator Albrecht voting yes. Senator Arch voting yes. Senator Armendariz voting yes. Senator Ballard voting yes. Senator Blood voting yes. Senator Bosn voting yes. Senator Bostar. Senator Bostelman voting yes. Senator Brandt voting yes. Senator Brewer voting yes. Senator Briese voting yes. Senator John Cavanaugh. Senator Machaela Cavanaugh voting yes. Senator Clements voting yes. Senator Conrad voting yes. Senator Day. Senator DeBoer voting yes. Senator DeKay voting yes. Senator Dorn voting yes. Senator Dover. Senator Dungan. Senator Erdman voting yes. Senator Fredrickson voting yes. Senator Halloran voting yes. Senator Hansen voting yes. Senator Hardin voting yes. Senator Holdcroft voting yes. Senator Hughes voting yes. Senator Hunt not voting. Senator Ibach voting yes. Senator Jacobson voting yes. Senator Kauth voting yes. Senator Linehan voting yes. Senator Lippincott voting yes. Senator Lowe voting yes. Senator McDonnell voting yes. Senator McKinney voting yes. Senator Moser voting yes. Senator Murman voting yes. Senator Raybould voting yes. Senator Riepe voting yes. Senator Sanders voting yes. Senator Slama. Senator Vargas voting yes. Senator von Gillern voting yes. Senator Walz voting yes. Senator Wayne. Senator Wishart voting yes. Vote is 41 ayes, 0 nays, Mr. President, to advance the bill.

**KELLY:** LB227A is advanced to E&R Engrossing. And I raise the call. Senator Aguilar has some guests in the north balcony, 60 fourth graders from Stolley Park Elementary in Grand Island. Please stand and be recognized by your Nebraska Legislature. Mr. Clerk, for the next items on the agenda.

CLERK: Mr. President, Final Reading, LB276.

KELLY: Senators, please find your seat for Final Reading.

**CLERK:** First of all, Mr. President, Senator Hunt would move to recommit the bill to the Health and Human Services Committee.

KELLY: Senator Hunt, you're recognized to open on your motion.

HUNT: Thank you, Mr. President. I wrote down so many things last night that— it's just so dumb to have to try to convince you guys that what you're doing is so hateful and so wrong, so morally wrong, and so taking this state down a path that the country is always— already on that you don't like, that you're too weak to resist. It's dumb and annoying and silly to have— laying awake for the last 81 days of work here, since January, thinking, all right, there's something you can say. There's a, a way to crack the code, if you only do the right type

of convincing, if you only come up with the right argument, if you only get the right doctor to reach out to the right lawmaker. And none of that is-- I mean, I don't know if that's true. I think that you're dug in and, you know, dug in as much as I am, but your commitment is motivated by hate and mine is motivated by love for my family and for other trans people I know and love in Nebraska, and for a love of this institution and a love of democracy and the type of country I would like to live in. Whereas, Senator Conrad said the First Amendment is big enough for everybody. A country where we have states like Nebraska that are big enough for everybody. You 49 members, you 33 members do not represent the will of Nebraskans. You are more radical than Nebraskans. Most of our constituents do not like you guys. And you can think, well, those aren't my people. Those aren't the people that, that I represent that I know. But when you want to go shopping and get some new clothes, you interact with these people. When you want to go out to dinner, you interact with these people. When you want to go to a movie, you interact with these people. When you want to get a drink, you come to my district and you interact with these people. And these are the people who are serving you, the people who you are cutting down the rights of. These are the people who are making sure you get your food, that you get your drinks, that you get your tickets, that you get your stuff checked out at the, at the checkout. They're the ones making sure that you can have fun in this state, that you have culture in this state. I've heard many of you talking about trips you're excited to go on, theater shows you're excited to see, concerts you're excited to go to, knowing that you are taking a vote against the culture of creativity and culture creation and beauty and life that produces the world that you actually like living in. You like going to concerts. You like going to movies. You like going to the theater. You like traveling. You like experiencing different cultures. But you're doing everything you can in this state with this little nugget of power that you have for a temporary time in your sad life to make life worse and harder for the people who entertain you, who serve you, who make sure you're able to have that life. That's what it is. It's as simple as that. And they don't like you and they don't like what you're doing to them and their friends. You should know that there's going to be a lawsuit when you pass this bill with numerous plaintiffs and that the taxpayers are going to pay for that. And I lost so much this session in terms of relationships with all of you, but I gained a hundredfold in relationships with the people I know who support me and my family, the people who I found out have the back of the LGBTO community and of women in Nebraska. That community is stronger than ever. And when you look at what's happening state to state around this country, these lawsuits are a big deal and that's

what we're walking into here in Nebraska. I don't know how some of you could have lived a life this rich, this large, this complex, with careers and marriages and divorces and kids and travel. Senator Linehan talking about how she's been in a war zone. I know-- you know, to say nothing of Senator Brewer. I know many of you have experiences like this. How can you go through life and experience all these things that the world has to offer you and have it culminate in coming here to take people's rights away, to discriminate against trans kids? How can all of these experiences and things lead you to think that that's the right thing to do? Senator Linehan told a story about her grandma or some matriarchal family member, I don't remember if it was her mom or grandma or aunt, but who said that they would be punished if they said hate, if they said the H word. And I've heard Senator Linehan say that she hates people on this floor. And I know it's one of those things, like, oh, I hate him, like, it's in jest, but I would like to sit down with that woman who said that and find out, Senator Linehan, if she thinks that I deserve this vote that you're taking, that people of Nebraska deserve this. And it's not just the outcome of the vote, it's not just the lawsuits that are going to come after that, it's the decimation of the culture in this state. It's Nebraska crossing a Rubicon where we are now openly, loudly, visibly, officially anti-trans. It doesn't matter if you think it only affects kids. It doesn't. I see Senator Sanders reading her official debate comments that have been given to her. We got the choreographed, you know, yield time to Senator Kauth, ask her this question. We don't do that on our side, like, just putting that out there. I've never been given a, a script in my life. Really, really. I've written things myself and read them. I've had staff help me write things that I read after I edited it. I've never been handed something or I've never been told, like, all right, Senator Hunt, now then you're going to ask Senator Vargas about this, and then Senator Vargas is going to make sure that Senator Conrad gets to say this. We don't have to do that because when you speak from the heart and you speak from personal experience, you don't have to choreograph that. You don't need anyone out in the Rotunda telling you what to say. You don't need Senator Hilgers, Senator Bosn--

KELLY: One minute.

HUNT: --helping you come up with some talking points or some things to, to say. You guys are in the arena. This is real. And the fights that we're having in here are nothing compared to the fights that the people outside are having because of the laws that you're passing, because of the harm that you're causing to them and their families. There are people planning now to leave Nebraska because of this. Me

included. But, you know, if you get an IKEA, goody, goody. Nebraska's better than this and bigger than this. We are better than this. We need to return to normal order that does not include these gratuitous bills--

KELLY: That's your time.

HUNT: -- of hate against LGBTQ people. Thank you.

**KELLY:** Thank you, Senator Hunt. Senator Raybould, you're recognized to speak.

RAYBOULD: Thank you, Mr. President. I just want to say for the record that I wholeheartedly support the adoption of the Certified Community Behavioral Health Clinic Act. We all know that mental health, behavioral health is essential to the well-being of the people that we represent. I know I can't convince you with my words, but I am going to continue to read the letters that I get and I'm sure you have gotten but haven't had a chance to read from our medical professionals. Nebraska Senators, I'm emailing once again to urge you to vote no or to not vote on LB574. I'm a born and raised Nebraskan who has lived here my entire life. I am fortunate to have been able to receive an excellent education in Nebraska to become a physician. And now I have the honor to care for Nebraskans as a physician. I'm a family medicine trained physician who has worked as, as a hospitalist at Methodist Fremont Hospital for the last four years. It has been difficult to be a physician the last several years through the pandemic and now political culture war, where the expertise of the majority of physicians continues to be discredited by GOP politicians and unfortunately, by the majority of the Nebraska Legislature. Recently, I've heard many of you say that since you have the majority in the Unicameral, you, you get to control what happens. If you trust in the majority, then where is the same level of trust for the majority of well-respected medical organizations who strongly oppose bans on gender-affirming care for gender nonconforming children, and oppose abortion bans? I am posting below the many medical organizations who have the majority of experts in the field of gender-affirming care who have publicly opposed bans on this important care. I'm going to pass her quotes out, and it's a full page of organizations. These are the medical organizations we depend on to help guide our practice, ethics, and evidence-based care. They represent the large majority of physicians in the United States. If the majority is so important to the 33 of you who have voted to advance this, why do you ignore the majority of physicians all but begging you to not ban this important healthcare and jeopardize our

patients, our licenses, and now subject us to criminal penalties for providing care that is well agreed is best practice by the majority of physicians in the country? This also applies to abortion care. The majority of physicians' organizations who advise on best practice are also strongly opposed to bans on abortion. This is not because we don't care about fetuses or babies, but because we care about the living, breathing human in front of us at the time they are seeking healthcare for a pregnancy. Every situation when someone is seeking abortion care is extremely complicated and unique, either medically, socially, or emotionally. Please trust us to do what we have been trained to do for over a decade. Many of us here in Nebraska care for our patients in an ethical matter without worrying about criminal penalties or potential loss of our licenses for providing the standard of care which is well agreed upon, again, by the majority of physicians. It is still extremely disappointing these two bills were lumped together into one giant mess. But, again, I ask you to vote no or don't vote at all on LB574 and the amendment. The many consequences of these bans on healthcare will not only result in actual lives lost via suicide or pregnancy-related conditions, but will also be devastating for Nebraskans as physicians flee the state to work in areas where we don't have to worry about not being able to provide the standard of care which is unethical for a physician to do because the majority of the Nebraska Legislature would not listen to the majority of--

KELLY: One minute.

RAYBOULD: --physicians in the state and country. Passing these bills will also have devastating economic impacts because major businesses will relocate or not invest in Nebraska, and the ability to host national events will be compromised. My husband and I are but two physicians in Nebraska, but we will not stay in the only state we've ever known if we have to practice with a constant worry about going to prison for providing the standard of care for gender nonconforming and pregnant patients. If I myself cannot access the full spectrum of care with any future pregnancies, and if our children cannot have access to healthcare they may need in the future, either gender-affirming or pregnancy-related, please consider all that our state stands to lose by passing these harmful bills. And she quotes Peter Parker, as we all know, as Spider-Man, whatever comes our way, whatever battle we have raging inside us, we always have a choice. It's the choices that make us--

KELLY: That's your time, Senator.

RAYBOULD: --who we are. Thank you.

**KELLY:** Thank you, Senator Raybould. Senator Machaela Cavanaugh, you're recognized to speak.

M. CAVANAUGH: Thank you, Mr. President. A couple of days ago, maybe it was yesterday, I don't-- no, it was a couple of days ago, I mentioned about a, a major funder in Omaha withdrawing their support of Catholic schools. And since making that comment, I've had other individuals contact me, who make financial contributions to Catholic schools, to let me know that they will be withdrawing their support because of the Catholic Conference's role in LB574. And before people ask me to yield to a question, no, I'm not going to tell you the names of people. But they did want me to share that this is happening. And I think part of that is in hopes that others who are paying attention will reevaluate, as Senator Kauth has encouraged people to do, where they spend their money, so. I appreciated Senator Hunt's comments about the arts this morning. In another life, I worked for the opera, for Opera Omaha. And an interesting thing that I have found about that particular art form is that it is pretty significantly funded by Republicans. That is sort of the art form of the Republican philanthropy. And I was the development director, so I was quite familiar with who was making contributions. And that just struck me because of Senator Hunt's comments this morning about the arts, but specifically opera. I got to know, when I worked there, the artists that would come from all over the country and all over the world. I have for another day a funny story about getting a visa for the director who was coming from Italy. And it was sort of a-- just a series of comical events. Anyways, he got here. It was fine. It worked out. But, oh, God, I mean, 60 percent of them, of the artists are gay, maybe more. And, like, 90 percent of them were cross-dressing for the art form, both men and women. So many operas stories require women to pretend to be men and men pretending to be women and so there was that. So we had just a cast of LGBTQ people who were dressing opposite their gender for this art form that people in this room probably enjoy. I hope they enjoy it. It's enjoyable. Yeah, and, you know, when I was there the, the company was really starting to get a new sort of revitalization. And people in Omaha who started really following it really followed that. It was the, the director of the company. He had moved here, he's from Nebraska, he moved--

KELLY: One minute.

M. CAVANAUGH: --back from Chicago. He worked for Lyric Opera in Chicago and he moved back to, to take the company. And he's-- I think

we're the same age, I think Roger and I are the same age or maybe he's a year older than me. Anyways, in his thirties at the time, and he brought new life and creativity to the opera and taking it outside of the Orpheum Theater, doing it in other places, making it more accessible. And I just worry about the future of his legacy because I don't know that people are going to come here to perform for us. I genuinely don't. I, I hear from some of those people still, keep those, you know, friendships and connections over the years, and they're devastated by what they see here and they don't know that they would accept a contract to come back to Nebraska. And let me tell you, those are some gorgeous voices, some truly stunning, life-altering-to-hear voices, so.

KELLY: That's your time, Senator.

M. CAVANAUGH: Thank you.

**KELLY:** Thank you, Senator Cavanaugh. Senator Blood, you are recognized to speak.

BLOOD: Thank you, Mr. President. Fellow senators, friends all, I stand opposed to the floor amendment, but in strong support of the underlying bill. But with that, since clearly we're taking time again, I want to reflect a little bit about some of the debate on LB574 and just kind of share some things I was thinking about when I was driving in this morning. And since clearly many of you are playing video games on your phones and reading things, I'm hoping that you take a minute and actually listen to what I'm sharing right now. So yesterday, Senator Aguilar said he doesn't think that children have the ability to make decisions about gender-affirming surgery. And I want you to know that I completely agree with you, Senator, and that is exactly the point and our concern and why we believe that these decisions should be made between medical professionals, plural, by the way, the parents or guardians, and the trans child. And throughout this debate, some of you shared how you believe physicians are making this a money-making venture, which is a false narrative. You have either knowingly or unknowingly, I'm going to give you the benefit of the doubt, lied because if you did your own research, you will see that you have crafted legislation and voted on it that might apply to approximately five trans kids per year when it comes to the surgery aspect. You're making laws based on four or five kids a year. Again, and I've said this over and over again, the average age of this type of surgery is 29.5 years of age. And you heard Senator Aquilar talk about his gay daughter's partner and how they were saving up for their surgery. It's not a decision people take lightly, and it's very

expensive. But maybe most important is that many of you constantly refer to the constitution during certain debates, but you cherry pick what you like about the constitution. The Due Process Clause of the Fourteenth Amendment protects the fundamental rights of parents to direct the care, upbringing, and education of their children. Children also have rights under the constitution, the right to equal protection, which means that every child is entitled to the same treatment at the hands of authority, regardless of race, gender, disability or religion. I had high hopes that we would "recraft" a better bill when an email was-- went out asking us for our suggestions to craft a better bill. However, it was clear that my particular suggestion was ignored. I have never understood the magnitude of time that's been taken up on this bill when any reasonable person would surely understand that we are in a biennium and have another year to address this bill. But yet you schedule it early on and you continue to push through, and then after losing on your first abortion bill, you connive to bring up a second bill that has not had a public hearing. Again, showing that you seem to know better that not only decades of process in our body, but those Nebraskans, our second house, who should have been allowed to come and testify on a bill of such importance to you, the people that you work for. You've talked extensively about how the parents know best about how and where their children should be educated on Senator Linehan's bill this year. Some of you had talked about your religion and that you also don't hate the LGBTQ community. But I challenge you to also remember that if you believe that we are members of the Body of Christ, we cannot be whole without the full inclusion of nonbinary, gender-expansive, and transgender individuals. And that includes the path that they take as part of that inclusion. I have to say that I am very appreciative of Senator Brandt--

**KELLY:** One minute.

BLOOD: --and Senator Erdman who actually turn and look at people when they talk on the mike, that you are engaged. We don't have to agree, but we've lost the ability to be even kind enough to turn our butts around and look at the person talking. I never thought I would see that day. Common courtesy. We don't have to like each other. We don't have to love each other. But good grief, can we at least show some common courtesy regardless of our feelings on that bill? Thank you, Mr. President.

**CLERK:** Thank you, Senator Blood. Senator Raybould, you're recognized to speak.

RAYBOULD: Thank you, Mr. President. This is another email from a physician who specialized in adolescent medicine. These are their comments. All this is my response to the reported medical professionals, and it's in air quotes. I think the intention is to be sarcastic in addressing us as legislatures. All this is in response to the reported medical professionals in support of criminalizing standard of care medical treatment for this less than 1 percent of teens and whom do not take care for those affected by gender dysphoria in their medical practice. I agree that it is certainly OK to have a disagreement and be respectful within the medical community or anywhere, but making something criminal illegal is different than an honest disagreement. Adolescents can certainly wait until they are adults to start hormone therapy. However, we know from medical research that a far higher than average amount of adolescents experiencing gender dysphoria will attempt and commit suicide before they are adults, fall into substance abuse, homelessness, sexual assault, sex trafficking, and other horrific situations in a far higher proportion than their cisgendered counterparts. Those are the reasons that the AAP Society for Adolescent Health and Medicine, Endocrine Society, and so many other major medical organizations around the world have adopted standard-of-care recommendations to help support these less than 1 percent of individuals. Yes, they still do hormone treatment in the UK and Sweden, but they have adjusted how they do the care through the university and state-run healthcare centers. It is fine to disagree or to be uncomfortable. I'm fast forwarding ahead. Also, I would really ask my respected medical colleagues to at least listen to and consider the professional opinions of those of us who specialize in the care of this population as I would respect a cardiothoracic surgeon's expertise on a Fontan, complex newborn heart procedure, or an orthopedic surgeon's expertise on treating scoliosis. I specialize in adolescent medicine which covers much more than the transgender medicine, but it is a part of that since youth began to develop this awareness as they enter puberty as do gay or lesbian individuals begin to recognize that they are not straight. It doesn't happen once you turn 19 in Nebraska or 18 in the rest of North America. And many of those individuals really struggle with significant discomfort. Some can wait, some really hurt themselves or worse before they turn 19. Comparing this to narcotics, substances abuse, and things that would involve killing, euthanasia, and infanticide suggests -- and -- a misunderstanding of the care and situations that we are trying to help with when caring for individuals with gender dysphoria. I suppose there are parents who could feel pressured and that would be part of our conversation in my clinic. There is no pressure from myself and my clinic aside from their own

child, but just awareness and discussion of risks, benefits. And I don't always agree or decide that hormone treatment is appropriate for every adolescent who comes in for this issue. Many more parents and individuals receive the opposite from their schools, church groups, and community and feel pressured-- persecuted for having this weird kid which makes those bad outcomes, suicides, substance abuse, homelessness, etcetera, make sense. I can assure that there are many parents who went through a long struggle to understand this, and then they are ready to help their transgendered adolescent. And now they are in tears trying to decide if they'll move or travel to Colorado or Minnesota if LB574 passes and makes it illegal for them to help out their teenagers who have--

**KELLY:** One minute.

RAYBOULD: --finally started to open up and become happy and feel well again with hormone replacement therapy and care of the psychological and medical communities. Again, discomfort and disagreement are perfectly fine and good, but that is different than making something criminal. I would honestly ask those who want this to pass and become illegal, what do you recommend that we do for these 11- to 18-year-olds who discover that they have gender dysphoria? What medical and psychological treatment do you recommend? Do you see them in your practice and help them? And I'd like to editorialize at this point, why are we leaving it up to the chief medical officer? Do we trust him to do a scope of practice and ask these professionals to assist and aid in coming up with the appropriate regulations and rules that help families in our state? Thank you, Mr. President.

**KELLY:** Thank you, Senator Raybould. Senator Machaela Cavanaugh, you're recognized to speak.

M. CAVANAUGH: Thank you, Mr. President. Well, Senator Raybould, the chief medical officer has not had a confirmation hearing yet, so we can't answer if we trust them, they have not been confirmed by this Legislature. They haven't had a public hearing. We don't know. But let's just give them all this authority anyways. I mean, they haven't been vetted. They haven't been and instill—installed by this body. I guess the answer is that 33 people in here feel very confident in their ability before they've even been formally installed into the position to take over the care of Nebraskans. Same person who signed on to a letter in collusion with Senator Kathleen Kauth from the Board of Health, so obviously a person of the utmost integrity and ethics we're dealing with here. I think Senator Hunt brought this up but, yeah, Senator Bosn, Mike Hilgers doesn't work here anymore. He doesn't

go there anymore. And so, you know, maybe don't give him floor time by making his speeches for him. And I am disappointed because I think that you are a smart lawyer and I think you know the law and I think you understand the law. And I'm not a lawyer and when you said that I was lying about criminal penalties you were being very disingenuous, because you and I both know that the criminal penalties for 20 weeks are going to be moved to 10 weeks with LB574 and the new amendment. There are criminal penalties. It is the current criminal penalties are going from being viable at 20 weeks to being instilled at 10 weeks. So that was unfortunate because I know that you knew that that wasn't real. I know that you knew that you were being disingenuous. And that is really, really unfortunate and you should take more care. That's just some friendly advice. People kept saying yesterday, words matter, words matter. They do. They really, really do. I agree. I know that the words that I say here matter. That's why I say things like baloney Skittles, because I think it matters that I don't use profane language on the microphone, because words matter. So, yeah, let's hold ourselves to a better standard shall we, or not. As long as we all are polite and get along, I guess that's what really matters. How much time do I have, Mr. President?

**KELLY:** 1:45.

M. CAVANAUGH: Thank you. Senator Day and I put together a minority statement for LB574 and LB626. And I discussed this with the Clerk's Office about if we could do an updated minority statement and it seemed like probably we could, but we didn't. Why? Well, the updated minority statement would have been to the new version of LB574, but a minority statement is in response to the committee process, and the new version of LB574 didn't go through the committee process. It came into reality on Tuesday--

KELLY: One minute.

M. CAVANAUGH: --and it's coming into law on Friday and we are doing wide-sweeping changes to medical practice standard of care in the span of four days. So it's not going to get an updated minority statement because, what the actual F, right, am I right, like, four days. In four days, this body that is supposed to be deliberative is deciding to ban abortion at ten weeks with criminal penalties. No hearing, no public comment, nothing. Four days. Remember that, Nebraska. Four days. They spent four days and only four days on taking away women's rights to healthcare.

KELLY: That's your time, Senator.

M. CAVANAUGH: Thank you.

**KELLY:** Thank you, Senator Cavanaugh. Senator Raybould, you're recognized and this is your third time on the recommit.

RAYBOULD: Thank you, Mr. President. This letter of concern from a physician is one of the chairs of the American College of Obstetricians and Gynecologists in Nebraska. The physician says: Dear Senator, the Nebraska section of the American College of Obstetricians and Gynecologists is asking you to oppose AM1658, as this amendment continues to open the door for unneeded harms to pregnant mothers and the practice of healthcare in our state. AM1658 does not address fetal anomalies that are not compatible with life. These are devastating diagnoses that are not often able to be reliably assessed via imaging until 18 to 22 weeks of gestation. If this amendment passes, a mother with an encephalitis pregnancy diagnosed at 18 weeks will have to travel out of state to seek care if she wishes to end the pregnancy. This is not a financial luxury that many Nebraskans can afford, and a family should not have to leave the state to receive accepted standard medical care. This is a scenario that will directly impact several Nebraska families every year needlessly. Additionally, AM1658 does not address the significant concern voiced by physicians regarding medical care for pregnant women with chronic and acute medical complications of pregnancies. Numerous examples of delays in care leading to increased morbidity are pouring out of states that have restricted abortion laws. Moving the gestational age from six weeks to 12 weeks does nothing to alter this. The ongoing exception of serious maternal mental health conditions negates the recognition of psychiatric diagnoses as medical conditions and remains unconscionable. From a hospital system perspective, I am sure you saw the guidance statement issued from DHHS and the chief medical officer. In the guidance statement, Dr. Tesmer suggests that had LB622 [SIC] passed into law hospital systems should create advanced guidance for their physicians in consultation with their legal department. If an emergency arises in which appropriate treatment is uncertain, this committee should meet urgently to help the treating physician make a decision that treats the woman appropriately within the law. This sentiment is the crux of one of the concerns with this legislation. It's states where laws like LB626 have been enacted the need for hospital legal and administrative committees to determine what type of diagnoses should receive care and when is precisely the reason why medical care is being delayed and patients are experiencing increased morbidity. It is not because doctors do not know how to care for patients. It is because they are trying to discern how to interpret the law. This is the premise behind a current lawsuit by seven women in Texas against the state. Leaving

the interpretation of delivery of medical care up to various hospital system committees creates a patchwork of care, meaning the care you receive will be dependent upon the door of which hospital you happen to walk into. One facility may allow induction of a pregnancy after PPROM and a woman delivers an infection, one may require another diagnostic criteria be met. One facility may allow for abortion in the setting of a new breast cancer diagnosis to receive treatment, one may not. As read in LB626, cancer is not an emergent scenario and the breast is not a life-sustaining organ. The prospect of developing these guidance statements, I am sure would not be relished by the hospital systems in Nebraska. And the question of liability for poor patient outcomes at one facility as compared to another should also be considered. We firmly believe that while Nebraskans value the protection of life, voters would rather see this done by improving access to quality healthcare and social determinants of life rather than abortion restrictions which knowingly harm vulnerable populations. And this was signed by two physicians, specialists in obstetrics--

**KELLY:** One minute.

RAYBOULD: -- and gynecology. Thank you, Mr. President.

**KELLY:** Thank you, Senator Raybould. Senator Conrad, you're recognized to speak.

CONRAD: Thank you, Mr. President. Good morning, colleagues. I had originally hit my light because Senator Raybould was on a roll there and I wanted to make sure since she had hit her time limit she had time afforded to her to continue her thoughts. But it looked like she, she wrapped them up just in time for her piece on the mike. One thing that I wanted to reaffirm and clarify before we get into the intensity of debate later this afternoon about why Senator Raybould's reading into the record and sharing the information from the American College of Obstetricians and Gynecologists is, is so critical in this regard. Colleagues, I just want to remind everybody that LB574, as amended, has an emergency clause on it. It has an emergency clause on it. That means under our law that it takes effect the day after the Governor signs it. Most of our laws, with a few exceptions that do have an E clause, typically take effect, I think it's about 90 days after sine die. So it's usually in, like, September in a long session. And think about that for just a minute. Many of the laws that we pass that don't rise to the level of significance and gravity for more technical or mundane things have a longer implementation date. And why is that? It's because it takes time to update the statute books, because it

takes time for the agencies and the other stakeholders impacted by our work together to get up to speed on whatever the new criminal law might be or the new banking law might be or the new health and human services or ag law might be. So that's one reason that we need to think really carefully about that. And you can see, even in the original measure that Senator Kauth introduced, there was, I think, an awareness of this where she had a, a later, a later date for implementation. And I want you to look carefully at the measure that is amended because it has an emergency clause on it. So by passing that with an emergency clause, we're changing the scope and practice of medicine on two primary areas overnight, overnight. And you might remember from some of the dialogue that Senator John Cavanaugh initiated with the Department of Health and Human Services at previous stages of debate and asked about simple things, like, are you going to be updating the reporting forms in relation to changes for the abortion law? Are you going to be updating your rules and regulations? And the response back, I believe it was from Dr. Tesmer, who's been nominated to serve as the chief medical officer and I believe is serving in an interim capacity and if I'm inaccurate as to that I'd be happy to correct the record, the response back to Senator Cavanaugh and as published in media reports was no, we're not going to be changing forms, we're not going to be updating rules and regs. That's going to be up to each individual stakeholder to convene a committee with their own lawyers and their own administration to figure out how to do it. So this new measure, which has been adopted just as part of the amendment on Select File or Final Reading that was returned to Select and then will be back before us for second Final this, this afternoon, these major changes have not been subject to public hearing, were not part of bills introduced--

KELLY: One minute.

CONRAD: --the abortion measure was not introduced in the first ten days of session. Not only does it contravene our legal obligations regarding single subject and title, there is no ability for doctors, hospitals, patients to have time to convene their administrative leadership and their legal team to figure out how to implement these measures. We give a longer runway for ag regulations. We give a longer runway for natural resource questions. When it comes to human rights and medical care, which is different for each and every patient, we're saying do it overnight? We're saying do it overnight. Even if you feel deeply committed to the measure, we still have the opportunity to ensure more thoughtful implementation together. And we need to talk about that. Thank you, Mr. President.

**KELLY:** Thank you, Senator Conrad. Senator Machaela Cavanaugh, you're recognized to speak. This is your third time on the recommit.

M. CAVANAUGH: Thank you, Mr. President. So, like I said, no updated minority statement because how do you do a minority statement that's supposed to be a report out of committee on something that never had a hearing, that only has existed for four days from start to finish? You can't. But the minority statement for LB574 that we prepared with our staff, we listed the names of everyone that came to testify, including those that didn't get to testify. And we listed the names of both the proponents and opponents that did not get a chance to testify. And if you want to read the proponents, you can do that on your dime. The opponents, well, I think that she's a committee favorite of all of ours and she's lovely and comes and shows up and advocates all of the time and is the trans person that every single person in this body knows, Josephine. So Josephine was the first one to testify in opposition to LB574. Josephine is the woman who you all walk past all of the time. She's oftentimes inside, right inside the glass you talk to. I've seen it. I've seen you all talk to her. She's the first person to testify in opposition, which isn't surprising. I mean, it's Josephine we all know she's a terrific advocate. I don't see her there right now, but she is here most days most of the time. And then there's Cait Smith with The Trevor Project. Mike Hornacek, a parent in Senator Kauth's district. At the heart of this, he is being attacked by his own state senator. His family is being attacked by their own state senator. Elizabeth Constance, American College of OBGYN. Jean Amoura, who's a doctor testifying on her own behalf. Daniel Rosenquist, the Nebraska Medical Association. Daniel -- Dr. Rosenquist, he was here not yesterday, the day before. He was here the day after LB574 as the doctor of the day. And I noticed that we don't have a doctor of the day today. And I asked the Clerk's Office and they said that's just the schedule, that's just how the schedule is, because I thought maybe we didn't have a doctor of the day because the physicians, Nebraska Medical Association physicians were perhaps in protest of this body. Regardless, it feels very poetic. Why would they want to sit here while we try to criminalize their profession further? Hannah Coffey, the Nebraska Psychological Association. Isabella Manhart, self. Rachel Ogborn, self. Alek Duncan, self. Now some of these people I know a little bit better than others. Alek is-- he's a doctor and on, I think it was on LB626-- no, it was on LB574--

KELLY: One minute.

M. CAVANAUGH: --on the first round. He was up in the balcony and we recognized him for an award in healthcare that he had just received.

This body stood up and applauded him while also working to take away his ability to provide care to his patients. But we're polite at least. We'll still clap for you while we try to dismantle your ability to serve your patients that you were just given an award for how wonderfully you serve your patients. Sarah Maresh, Nebraska Appleseed. Reverend Dr. E. Scott Jones, Nebraska Conference of United Church of Christ. Ash Homan, love you, Ash. Camie Nitzel, Kindred Psychology. Elizabeth Weedin, doctor.

KELLY: That's your time, Senator.

M. CAVANAUGH: Thank you.

**KELLY:** Thank you, Senator Conrad-- Cavanaugh. Senator DeKay, you're recognized to speak.

**DeKAY:** Thank you, Mr. President. I would ask if Senator Wishart would yield to a question.

KELLY: Senator Wishart, will you yield to a question?

WISHART: Yes, I will.

**DeKAY:** Thank you. Would you give us an overview or a refresher, per se, of what LB276 is all about?

WISHART: Yes, I'd be happy to. Thank you for asking. So, colleagues, today we are on Final Reading for LB276, which is a bill that delivers a model for behavioral health services Nebraska's-- in Nebraska known as the Certified Community Behavioral Health Clinic Act. In a nutshell, this legislation will increase access to mental and behavioral health and substance abuse services in our state, and it will do so by providing a system of care that allows providers across the state to be able to have a holistic approach to the services that they provide to their clients. This bill is a bill that I have worked on for a number of years and I am thrilled to have seen it come out of committee unanimously and have passed rounds, two rounds of devote-of vote unanimously. One of the, one of the benefits of CCBHCs that caught my attention and is, is the reason that I introduced this bill in the first place is that, one, it recognizes the importance of looking at a systems approach for supporting people who are having a mental health issue or a substance abuse issue. It takes a community-wide approach. So instead of just focusing on serving a person when they come into one of these facilities in one way, instead it branches out and says, how can we collaborate with schools, community centers, law enforcement, hospitals to make sure that we

have this system in place to support those-- some of the people in our state who are most vulnerable and, and really battling with addiction or, or with mental illness? The other thing I like about this piece of legislation and this new approach is that it has now been tested and piloted not only in Nebraska but across the country and it works, colleagues. In, in states and in communities that have passed CCBHCs, we have seen both reductions in emergency room visits and also we've seen reductions in incarcera-- [INAUDIBLE]. And because of that, the investment that we're making in this program today will result in dollars saved in the long term and also lives saved, as well. So, again, I appreciate you asking that question, Senator, and I encourage my colleagues to vote in support of LB276.

DeKAY: [RECORDER MALFUNCTION] back the rest of my time.

**KELLY:** Thank you, Senators DeKay and Wishart. Senator Conrad, you're recognized to speak.

CONRAD: Thank you, Mr. President. Good morning, colleagues. I appreciate Senator DeKay asking Senator Wishart more about that really critical behavioral health component of this omnibus, omnibus Health and Human Services bill because I hope it can remind us of the muscle memory that we need to figure out how to work together to meet the challenges that are before our state, whether it's in terms of mental healthcare or workforce or education or delivering for working families and protecting civil rights. The other thing that I wanted to inject because I think it dovetailed nicely from Senator Raybould's comments and is on point, as is a Health and Human Services measure before us, as is the bill later this afternoon, LB574, when you think about how the amended version is being touted as a compromise, and if you've been told that the rules and regulation or delegation process, therein, will ensure a pathway to care, I want you to take a minute and if you don't believe me you can Google it for yourself or even look in the on your own legislative record. Let me tell you about something that's been ongoing in terms of rules and regulations at the Department of Health and Human Services in relation to care for LGBTQ Nebraskans. This has been happening for, I think, over ten years and may be getting closer to 15, but Nebraska behavioral health leaders, psychologists, and psychiatrists were trying to update the rules and regulations governing their profession and adopting the ethical code in conformity with their professional standards. One of the key components, therein, was to be able to provide a referral, colleagues, a referral, to be able to provide a referral to other psychologists and psychiatrists for LGBTQ patients in line with their ethical code. And it was taken up in rules and regs, and it's been mired in rules

and regs for almost 15 years just to provide a referral for care to LGBTQ Nebraskans in line with their ethical professional code. If you believe there is an access to mental healthcare, to essential healthcare, as has been promised in this amendment, go look for yourself. We aren't even allowing psychiatrists and psychologists in the state of Nebraska to have an updated rule and regulation to provide a referral for care if their patients are LGBTQ. We've been mired in that process, I think, for over a decade. It had reached such a point of inaction that we were risking licensure and reciprocity with other states that Senator Patty Pansing Brooks actually brought forward a bill to the Health and Human Services Committee, years ago, to say you have to referee and stop this nonsense. So if you think that is a path for care, it is not. It is not. And you don't have to take my word for it, go look at the record. Go talk to Health and Human Services. Go talk to the Governor's Office—

**KELLY:** One minute.

CONRAD: --or HHS or the CMO. If we haven't even been able to remove a speech restriction to provide a referral for mental healthcare, how in the heck are we going to have a thoughtful process to ensure access to behavioral healthcare and other essential medical care in this instance? Thank you, Mr. President.

**KELLY:** Thank you, Senator Conrad. Senator Hunt, you're recognized to speak.

HUNT: Thank you, Mr. President. One thing I can't stop thinking about from yesterday, and I cannot believe it was just yesterday, is that you are all missing moments with your families that you will never get back. You are all giving up your time and missing once-in-a-lifetime moments with your families and loved ones that you will never get back because you are here fighting to hurt mine. I received this email that was also sent to Senator Riepe. Senator Riepe, I am a proud native Nebraskan graduating from UNL with honors as a Truman scholar and student leader of the year. I'm also the child of Rick Clements, Senator Rob Clements' brother. I grew up in Elmwood. I love Nebraska prairie, sunsets, and the slow way of life. I really miss it. I'm also LGBTQ. I left behind a full-ride scholarship to UNL Law because the climate in Nebraska was not safe for me. I didn't think I'd be able to pursue a career in law without discrimination. I would have loved to stay and perhaps contributed to civic life as my uncle is now doing. I left to start a family elsewhere because I was afraid to raise a family in Nebraska. Fears of violence and prejudice. I implore you to vote no on LB574. While I agree that medical care for gender

nonconforming youth must be held to the highest possible standards, this bill is not the way to accomplish that goal. As a former hospital administrator -- to Senator Riepe, you must know that when uneducated government bureaucracies improperly meddle in medicine, science, health and wellness, the results are harmful for patients and hamstring doctors' abilities to do their job. More personally, this bill attacks a group of people that are some of the most vulnerable Nebraskans. I grew up gender nonconforming in a small town in Nebraska. It was really difficult. This bill sends the message to youth that there is something intrinsically wrong with them if they color outside the lines of rigid gender roles. That is not a good message to send. Please vote no. Respectfully, Wilder Clements. I also got this call five minutes ago. My staff relayed it. This is from a 72-year-old Republican in Senator Riepe's district. He said: Thank you for opening my heart and my mind to people I wasn't very receptive to in the past. I did a lot of growing up this year hearing you speak on the floor. Thank you for educating me and helping me understand and accept others with differences I do not understand. Thank you, Mr. President.

**KELLY:** Thank you, Senator Hunt. Seeing no one in the queue, you are recognized to close on your motion to recommit.

HUNT: Thank you, Mr. President. I'll read-- we have a lot-- Senator Cavanaugh later is going to share breaking news from the medical community here in Nebraska, but I want to share this physician commentary on LB574 that we received today. Dear Senator Hunt, I'm a physician who has recently returned to Nebraska to live and work. My work promotes population health and aims to inform evidence-based health policy. Below is a commentary I have just written and will likely seek to have published independent of current legislation as an op-ed or letter to the editor. However, I'm sharing it directly with you in case it is helpful in any way to help your colleagues understand our advocacy efforts. The main message is one of caution in using the blunt tool of legislation to impact medical decision-making given the incredible nuances of health and healthcare and the predictable harm induced by such legislation. It also speaks to the problems of politics overcoming reason, dialogue, and how such an environment makes nuanced laws even less possible. How many-- OK, hold on now, how many of you-- I know Senator Hughes, I know Senator Ibach, Senator Brandt, several of you in the false, fake negotiation process between Select File and Final Reading that, that Speaker Arch and Senator Kauth put together to give the appearance of, you know, that they do care, there were some amendments and there were some policies, like codifying the standard of care, that you liked, that you

preferred. I know Senator Hughes said that she stayed up until-- all night or 2 a.m. or something talking about, very emotional, how she's trying to come up with an amendment that makes everybody happy. And this is what we ended up with, a ten-week abortion ban, delegating all of the power to kicking the can to the chief medical officer saying you figure it out. Let's give it to this Republican political appointee who has already come out as a bigot opposed to transgender healthcare. It's like-- the, the compromise that you came up, you need to understand is worse than the original bill. Must be said. This man writes: Born and raised in Nebraska. I'm back in my home state this year after nearly three decades of practicing medicine and aiming to improve our healthcare system and the policies impacting it in other settings. In addition to being a physician, I am a community member who is increasingly frustrated by our political tribes, as efforts to create a culture of us versus them in absolutist ways that seem intent on fracturing society. While these divisions are not yet as acute here as in many other areas of the country, they are nevertheless tearing at the fabric of the good life in Nebraska. Of particular concern to me are current efforts in Nebraska and elsewhere that take aim at medical care decision-making through legislative means. With all due respect, it seems that those driving these efforts either lack a full appreciation of the complexity of medical care decisions or have decided that taking a dogmatic, one-size-fits-all stance is more important for political reasons than avoiding a very real risk of harm to individuals. In medical school, young physicians in training are often taught to avoid going nuclear with antibiotic choices. This refers to the use of broad spectrum antibiotics to cover all bases--

KELLY: One minute.

HUNT: --when a more specific, targeted, and often much less expensive antibiotic will do the trick. I can't help but think of legislative solutions to medical care challenges as similarly going nuclear. That is a great analogy. Any medical decision is made collaboratively between a patient and a physician, mindful of a myriad of co-occurring physical and mental health needs and the distinct mix of social complexities of life of that particular patient. The variations of health, illness, and social factors that need to be accounted for in good medical care can be incredibly nuanced in ways that political parties, political backroom negotiations, and the legislative pronouncements that emerge have little interest in and even less capacity to incorporate. Thank you, Mr. President.

**KELLY:** Thank you, Senator Hunt. Seeing no one else in the queue, and that was close, the question is the adoption of the motion to recommit

to committee. All those in favor vote aye; all those opposed vote nay. There's been a request for a roll call vote. Mr. Clerk.

ASSISTANT CLERK: Senator Aguilar voting no. Senator Albrecht. Senator Arch voting no. Senator Armendariz voting no. Senator Ballard voting no. Senator Blood voting no. Senator Bosn. Senator Bostar voting no. Senator Bostelman voting no. Senator Brandt voting no. Senator Brewer voting no. Senator Briese voting no. Senator John Cavanaugh. Senator Machaela Cavanaugh not voting. Senator Clements voting no. Senator Conrad voting no. Senator Day. Senator DeBoer voting no. Senator DeKay voting no. Senator Dorn voting no. Senator Dover. Senator Dungan. Senator Erdman voting no. Senator Fredrickson voting no. Senator Halloran voting no. Senator Hansen. Senator Hardin voting no. Senator Holdcroft voting no. Senator Hughes voting no. Senator Hunt voting no. Senator Ibach voting no. Senator Jacobson voting no. Senator Kauth voting no. Senator Linehan voting no. Senator Lippincott voting no. Senator Lowe voting no. Senator McDonnell voting no. Senator McKinney voting no. Senator Moser voting no. Senator Murman voting no. Senator Raybould voting no. Senator Riepe voting no. Senator Sanders voting no. Senator Slama. Senator Vargas voting no. Senator von Gillern voting no. Senator Walz voting no. Senator Wayne. Senator Wishart voting no. Vote is 0 ayes, 39 nays, Mr. President.

**KELLY:** The motion to recommit fails. Mr. Clerk, for the next item on the agenda.

**ASSISTANT CLERK:** Mr. President, Senator Machaela Cavanaugh would move to return the bill to Select File for a specific amendment, that amendment being FA151.

KELLY: Senator Machaela Cavanaugh, you're recognized to open.

M. CAVANAUGH: Thank you, Mr. President. FA151 likely strikes Section 1. I think everything I filed this morning strikes Section 1. Not in a heavy-thinking mood on my motions today. Senator Hunt alluded that I was going to be sharing something. The pages have distributed a letter to the body and I believe that these individuals who have signed onto this letter are sharing this with the press. If the press does not get a copy of it from them directly, I am happy to give you a copy, as well. This is an open letter to Nebraska legislators from healthcare professionals, and I'm going to read this letter. But before I do, I want to give you some of the specifics about it. It has 1,068 healthcare professionals in the state of Nebraska signed onto this letter. This letter for the record, because I know that Senator Linehan likes these specific details, was drafted and shared and

signed onto at noon on May 18, 2023, and it closed at 8 a.m. May 19, 2023; 1,068 healthcare professionals in less than 24 hours signed onto this letter, knowing that it was going to be distributed to the Nebraska Legislature and then they gave me a copy to share with all of you. An open letter to Nebraska legislators from the healthcare professionals: To the members of the One Hundred Eighth Legislature, LB574 in its monstrous, newly amended form is a direct attack on the medical community of our state. The original bill was egregious enough, a blatant attack on the rights of parents and their children to make healthcare decisions in consultation with their healthcare providers. This portion of the bill goes in direct opposition to the recommendations and guidelines presented by trusted medical associations from the American Medical Association, the American Academy of Pediatrics. It also goes in opposition to the feedback presented in multiple forms of hundreds of Nebraska medical providers who have urged you to vote no on this bill, in addition of an ill-informed 12-week abortion ban with no exceptions for fetal anomalies and loopholes that will lead to criminal penalties for physicians who provide standard-of-care medicine is completely unacceptable. It creates yet-- oh, 54 signatures added in the last four minutes. Thank you, Senator Hunt. It creates yet another unnecessary barrier to healthcare that is already difficult to access in our state and it penalizes healthcare providers for providing the safe-- the lifesaving care they, they are expertly trained to provide. Let us be clear, this bill puts patients' lives at risk. It puts the careers of medical professionals at risk. We refuse to accept either. The signers of this letter have called, testified before the HHS Committee, written letters and emails, pulled you off of the floor to share our concerns. You have chosen to ignore us, chosen to remain ignorant, chosen your personal beliefs over the health and well-being of our community. Most of us know of at least one healthcare provider considering relocating because of this bill. Many of us have had to cancel a sacred-- scared patient or family member who is concerned about what this bill means to them. Those of us who teach at our state medical schools know that this will make it harder to graduate doctors who want to stay and practice in Nebraska, and those of us who practice in rural communities know that this bill will help disseminate what is-- decimate what is left of our rural healthcare system. You have a choice today. Listen to healthcare providers. Listen to business leaders. Listen to your constituents. Vote no on LB574. Sincerely, 1,068 medical professionals in this state. How many voices do you need to hear? What number is enough for you or are you just going to wait until they voice it at the ballot box? Because they're going to. This does not end today for any of us. For any of

us, this does not end today. This is just the beginning. And how many people does your Lord have to send to you before you listen, before you stop destroying a state that we all love and call home and raise our families in? How many, how many of your own children have to call and beg you? How many more? What is wrong with you? What is wrong with you? Why are you doing this? Why are you doing this to our kids? Why are you doing this to our doctors? Why are you doing this to our communities? Why are you doing this to our economy? Why are you doing this? Please stop. Please, please stop.

ARCH: Senator Erdman, you are recognized to speak.

ERDMAN: Thank you, Mr. President, and good morning. For those of you that are viewing from home, let me remind you, we are talking about or should be talking about LB276, a bill that a vast majority of us have supported on two rounds of debate. But what you've been hearing is discussion about a bill that's coming up later this afternoon, LB574. So I, I would suggest that what we should do is we should record the minutes that are spoken of about LB574 on these other bills, record the minutes and credit those to the two hours of discussion we will have on LB574. And by the time we get to LB574, we will have used up the full two hours and we can just vote. That would seem to make sense to me. So we have heard for the last hour and 20 minutes all about how this is going to drive everybody from the state of Nebraska. We have heard that the Lord has sent messages to us about what we should do. Well, I have the rule book of all rule books. It's called the Bible. I've read that several times. I've seen in that rule book where God sent many plagues on the Egyptians. God sent a lot of things to get people's attentions. God did not send us here to kill babies. God does not approve of killing babies. He doesn't approve of dismemberment of a human life because it's convenient or it's called healthcare. He doesn't approve of that. So I don't know what God you're talking about, but the God that I know is against abortion. There are numerous places in the rule book that talks about God knowing me in my mother's womb, knew me before I was created. That's the God that I serve. Don't stand up on this floor and try to tell me that God has an opinion other than that, he does not. So don't have to try-- don't try to take the holy high ground that you're something special and you've heard directly from God. We all can hear from God, open the rule book and read it. So this-- these comments will catch a lot of attention and it will get more lights on and that's fine with me. But I'm not going to stand by and listen to the threats and the comments that have been made about how it's going to drive everybody from the state in healthcare, and saying abortion is healthcare is like saying being

raped is lovemaking. That's a fact. So it's time to move on, deal with LB276, and this afternoon we'll deal with LB574. Thank you.

ARCH: Senator Raybould, you're recognized.

RAYBOULD: Thank you, Mr. President. I'm really tempted to respond with another situation in the Bible, and I think I'll just go down that rabbit hole. There was a time when Moses was trying to lead the Israelites out of Egypt and all the persecution and suffering that they have endured for decades, more than a century. And Moses repeatedly went to the Pharaoh and begged and asked him, please let my people go. Please let my people go. And the Pharaoh chose not to listen to Moses and then the whole land of Egyptian was struck down by plaque after plaque because they did not listen to Moses, who was speaking the word of God. But, more importantly, I believe in listening to our professionals who have dedicated their careers and lives to saving patients. And I will continue to read additional letters from physicians that I've gotten to know throughout this whole process that share their concerns. I am writing to express my opposition to AM1658. On April 27, the motion to invoke cloture of LB626 failed. There was a full and fair debate on the bill. Now in an attempt to push this legislation through, it has been attached to an equally harmful bill. I'm sorry, I should have said this is from an OB-GYN, a specialist in maternal fetal medicine. I am writing to you as a Nebraskan, a mother, a voter, and, importantly, a physician. I am a specialist in maternal fetal medicine and went through 11 years of postgraduate training to take care of the highest-risk pregnancies one can encounter. The complications range from serious maternal illnesses to lethal fetal anomalies to life-threatening pregnancies, complications. The conversations and the decisions that patient, patients face in my office every day have one thing in common, they are private healthcare matters that should be kept between the patient and the physician. I have spent a considerable amount of time over the last year educating senators and voters alike about the consequences of extreme abortion bans. I consider a 6- or 12-week ban to be extreme. It does not take into consideration some of the highest-risk scenarios I see, serious fetal anomalies or genetic conditions, pregnancy complications like previable rupture of membranes, mental illness, and grave maternal disorders such as lupus or renal disease. There are medical books dedicated to all the complications that can occur in a pregnancy so to summarize it is-- to summarize it in a letter is impossible. But that is why people like me and my colleagues exist, so we can care for these patients with evidence-based medicine. For our government to intervene in such matters is unethical, unjust, and dangerous. AM1658 is focused on the fetal heartbeat. To be

abundantly clear, a fetus at 12 weeks cannot survive outside the uterus. The earliest is 22 weeks under the very best of circumstances. The person carrying the pregnancy is a living, breathing human life. Why are we discounting this fact? Is that life not important, as well? Many senators have relayed personal pregnancy stories about choices they made. The bottom line is that it was their choice and no one else's. I have patients every day that make that same choice to carry a fetus with a lethal anomaly, to continue a dangerous pregnancy, to wait until they are extremely sick to deliver for the chance to have a live-born baby. I also care for people who have four children at home who need their mother, who are faced with a dangerous pregnancy that could end their life, cause unimaginable pain, lead to a stillbirth or a--

ARCH: One minute.

RAYBOULD: --thank you-- or a baby that survives hours or days. I care for these families with compassion, respect, and dignity, no matter the choice they make. It is their choice, not mine, not the government's. I'd like to share also with you that my goal is always a healthy mother and a healthy baby. That will always be what I strive for. To think that physicians are advocating for abortion is nonsense. We are advocating for our patients to have a choice when they face situations that I would not wish on anyone. I also want to make it clear, we are not asking for anything other than maintaining the current restrictions. Nebraska already has restrictions in place. We do not need more. If you vote for LB574 and AM1658, you are voting to remove patient autonomy, voting for forced pregnancy, and voting against experts in Nebraska. Make no mistake, these bills will harm Nebraskans, drive physicians from our state--

ARCH: Time, Senator.

RAYBOULD: Thank you, Mr. President.

ARCH: Senator Bostelman, you are recognized.

BOSTELMAN: Thank you, Mr. Speaker. Good morning, Nebraska. Good morning, colleagues. I want to speak-- I'm-- I oppose the FA151, FA151 by Senator Cavanaugh. I do support LB276e and I appreciate Senator Wishart bringing the bill and, and what the bill will provide, can provide to the state of Nebraska so I think it's very important. So I wanted to speak, speak about a couple of things that I talked with her off, off the mike about it, just kind of asked a little bit more about it. But what I want to talk about is, is the services that on the

committee statement says it provides. But then something that I've talked with our probation officers over the years that we seem to have an issue with when it comes to EPC, Emergency Protective Custody, and how-- I'm, I'm hoping, and as we talk, we both think that hopefully this bill and, and these services may help in those areas. So in the-on the committee statement in subparagraph (b) it says: Provide, at a minimum, the following community-based services either directly or indirectly through formal referral relationships with other providers and subparagraph says: outpatient mental health and substance abuse-substance use services; crisis mental health services; screening, assessment, and diagnosis, including risk assessments; person-centered treatment planning; outpatient clinic primary care screening and monitoring of key health indicators and health risks; targeted case management; psychiatric rehabilitation services; peer support and counseling services and family supports; and community-based mental healthcare for members of the armed forces and veterans consistent with minimum critical [SIC] mental health; and guidelines promulgated by the Veterans Health Administration. I think that's important to understand and the services, I think, we're bringing out to the communities that this will provide. And what I'm talking about specifically is, is as I appreciate what our probation officers do and deal with, especially when it comes to juveniles, I know several years ago, and I think we've worked on this a little bit, but I'm not sure that we've really overcome this hurdle yet, the only person that can EPC a juvenile or a person into a hospital care, mental healthcare is a law enforcement officer. And probation officers do not, do not fit into that statutory requirement. And what's happened before is in a case I've talked about several years ago, the chief probation officer had a juvenile with her in, in, in a vehicle and had traveled around the state for more than a day with the juvenile. The young lady in the vehicle with her went to hospitals, the appropriate hospitals, tried to get her to receive care, to be EPCed. Unfortunately, I think the young lady knew how to answer the questions the right way so law enforcement would not take her into custody and, and EPC her. And that caused a problem in the sense that it took so long that eventually she tried to hang herself in the vehicle. She was unsuccessful at doing that. And then she was obviously admitted to the hospital and received care. So my concern has been over the years, and we-- as I've talked with probation, as I've talked with DHHS, is we-- I'm, I'm hoping we have found a way to address that more directly because we have few facilities and-- that are out there that can handle this. So what I'm hoping with is what we see through the program, through this that Senator Wishart has, has -- that we're going to vote on here in a little bit, that this program that we get out there for mental health

will provide more services, more opportunities for probation and youth to be able to take advantage of those services so we don't get to that point. So we don't have individuals--

ARCH: One minute.

BOSTELMAN: --at that point in their life that they feel that that's where they're at and that's all they, they can do. Where you may be able to take that juvenile to law enforcement or to the hospital and try to get them EPCed and they say the right thing so they don't, well, maybe the same person you could take to a clinic somewhere and have help provided there. So I really appreciate what Senator Wishart has done with this. Again, I do not support the floor amendment, but I do wholeheartedly support LB276e. Thank you, Mr. President.

ARCH: Senator McKinney, you're recognized.

McKINNEY: Thank you, Mr. President. I rise in support of LB276. But I wanted to rise because it's-- to me, it's an important day and this day for the rest of my life will be important. Today is the birthday of El-Hajj Malik El-Shabazz, otherwise known as Malcolm X, who is the most globally famous and recognizable Nebraskan ever. And just these conversations go back to a lot of the things he said in his life prior to his death. And one of the things he, he used to stress is having humanity for everyone and leading with that lens and taking into account everybody's perspectives in the things that we do. And there was a quote, I was going through some quotes today, of his today and this, this one kind of stuck to me: Despite my firm convictions, I have always been a man who tries to face facts, and to accept the reality of life as new experience and new knowledge unfolds it. I have always kept an open mind, which is necessary to the flexibility that must go hand in hand with every form of intelligent search of truth. And I think we all should do the same. We all can have our beliefs. We can all have our upbringings. But at the end of the day, I think to be a leader and to be an effective leader, we all have to have an open mind to things and things that change. And I think we, we can't be stuck in a box. And I know a lot of people might have their opinions about Malcolm. But if you still have those opinions, that means your mind is still stuck in a box and you're refusing to open your mind and view him for who he was and what he meant and what he means to my community, because he's from north Omaha, but he's from Nebraska. Last year, he was inducted into the Nebraska Hall of Fame. He'll have a bust, a bust in one of these hallways. And also, you know, I introduced a bill, LB53, to make his birthday a state holiday. And I didn't want to make it a state holiday just because of Malcolm X, I

wanted to make it a state holiday because I think we should honor him. But we should honor him because, one, he's from Nebraska; and, two, I think if we honor him, I think across the state, hopefully, trying to be optimistic, we could begin to open minds to what is true history in this nation. And I know a lot of people don't like to talk about the true history, historically of what happened from creation of this nation to now. But I think in honoring his birthday, we, we, we begin to try to make this space a better place. Because currently, it's horrible. And that's just the honest truth. And I, I just wanted to lead with that quote. I think everyone, no matter where you're from you should celebrate Malcolm X's birthday, especially if you're from Nebraska. Because when you look across the country, other states celebrate his birthday way better than we do. Other nations celebrate him way more than we do, and we barely do anything. And today they're having some celebrations at the Malcolm X Memorial Foundation and they're doing a lot of things all over the weekend.

ARCH: One minute.

McKINNEY: Also, his family and the Shabazz Center in, in Harlem,, at the Audubon Ballroom where he was killed, they're doing a lot of great things, as well. And I think as a state we should do that. But, most importantly, I think as leaders we should all have open minds and we should be open to change and we shouldn't be stuck in a box, just because of how we were raised. Thank you.

ARCH: Senator Hunt, you're recognized.

HUNT: Thank you, Mr. President. This open letter to Nebraska legislators from Nebraska healthcare professionals that nearly 1,200 doctors, licensed medical professionals in Nebraska have signed at this point in the last 24 hours. This letter will be kept open until 2:00, and then it will be shared with us, with the final names of, you know, all of the people in Nebraska who we trust to provide us with healthcare who are against this bill. Senator Erdman said that saying abortion is healthcare is like saying raped is, is lovemaking. You know, as a rape survivor, that about took the wind out of my chest. Right? Senator Erdman, it's precisely because there are men out there raping women that the right to abortion is so fundamental and important. It is because of men that we have to keep abortion legal. And having safe and legal medical care is so important. Senator Jacobson said that they had a D&C when his wife was suffering a miscarriage. That was an abortion. That was healthcare that Senator Jacobson and his wife are happy they were able to get. That was healthcare. Unbelievable, these people. I'm just saying what you said.

I don't know your God the same way you know your God, but I think that your God is working through me to reach you. And I think there's something to be said about how LB574 is not a conservative bill. It's an extremist bill. It goes against traditional conservative principles of individual liberty and leaving people alone and trusting people to make their own decisions when they don't infringe on anybody else's rights. This was a principle upheld in opinions by Anthony Kennedy, a Reagan appointee, in the Lawrence decision that struck down laws criminalizing consensual sex between gay couples. This was a principle upheld in the Obergefell decision upholding the right to same sex marriage. These are conservative ideas giving people the freedom from government interference in their private lives. This extreme bill breaks with other conservative principles of supporting commerce and business and activities that we license people for here in Nebraska. Nebraska businesses are literally telling you that they don't want this bill and you're not listening. Nebraska physicians are literally telling you they don't want this bill and you're not listening. How many businesses are supporting LB574? Where's the letter of thousands of business owners that want us to pass this bill so they can discriminate against trans people? There isn't one. They aren't. Even Senator Ballard, who owns a bakery downtown, has pride flags in the window as he's going to vote to take away the rights of LGBTQ people. Make that make sense. Businesses don't support this because it hurts their ability to do business and recruit talent in Nebraska. The abortion ban tacked onto this just emphasizes the government interference that Sandra Day O'Connor, another Reagan appointee, recognized in the Casey decision, that severe restrictions on women's access to abortion would place an undue burden on women's liberty to make their own reproductive decisions. But instead, you have departed from these conservative ideas. And you've become an extreme party--

ARCH: One minute.

HUNT: --of command and control, flouting procedural rules to get what you want, restrictions on bodily autonomy, restrictions based on how you want other people to raise their kids. And it also masquerades as a pseudo-Christian religious bill, imposing Christian values on parenting that are not rooted anywhere in the Bible, that have nothing to do with Bible-believing Christianity and, in fact, go against Jesus' teachings to support the marginalized and the dispossessed. It's all moral policing rooted in fear and ignorance, and it allows Republican lawmakers to duck actual governing responsibilities and the real work of government service. Instead, you're using fear tactics and false propaganda to get your base riled up and scared about where society is going. In fact, society is fine, and the vast majority of

Nebraskans are tolerant and respectful and support each other's rights to live their private lives freely and--

ARCH: Time, Senator.

HUNT: --with dignity. Thank you, Mr. President.

ARCH: Senator Raybould, you're recognized.

RAYBOULD: Thank you, Mr. President. This letter is also from one of our physicians. I'm not sure where they practice, but-- well, it, it states it in his comments. I've had the pleasure of interacting with many of you and your committed staff. For those whose acquaintances I have not made, I'm a primary care doctor to the underserved, teaching physician and HIV expert. My Nebraska roots go back almost 100 years on my father's side. I'm the grandchild of immigrants and continue to care for immigrants, as well as all who need my services in south Omaha today. I'm very proud to be a decorated physician advocate and am committed to the public health of all Nebraskans, although I have the full support of my primary employer and I'm echoing the NMA positions; please disregard my statements as mine and mine alone. Both LB574, LB626, AM1658 are not good for Nebraska. They are harmful to the populations they target. They represent attacks on dedicated physicians who are providing the standard of care in line with our Hippocratic Oaths to our patients. They are very injurious to physician training, recruitment, and retention. They contradict conservative principles, including limited government and a parent/family's sacred responsibility to direct the medical and moral upbringing of their children. They are discriminatory. Bills like this banning healthcare disproportionately impact black, brown, and other minority people. There is no disentangling their effects from the racial disparities that our best values call us to strive against. They are contrary to the positions of major medical societies in the best practices of care. They are a violation of human rights. They remove patient and family autonomy, which is a core principle of medical ethics. Banning reproductive healthcare has already led to horror stories, unintended consequences, anguishing nightmares for families receiving crushing news about desperately wanted babies, with their personal choices overruled by law with no support for the aftermath, physicians muzzled in the exam room with pregnant women, and entirely preventable tragedies -- and, and I'm -- I lost my place -and, and entirely preventable tragedies. Bills and politics are leading highly skilled and desperately needed doctors to contemplate leaving areas where they are sorely needed, never go there to begin with, or to follow through because they cannot stand to have their

principles violated. This is leading to worsening of healthcare deserts which harm all those left behind who can no longer serve, leading to a near tripling of maternal deaths. Women suffer devastating economic impacts due to care bans, which they already face injustice and glass ceilings, and mothers are least supported in the places with the toughest restrictions. Reproductive care bans are also inextricably linked to racial disparities. Though the Supreme Court decision did not mention race, overturning Roe v. Wade was not and there is no such thing as a race-neutral policy. Even the discussion of banning gender care has negative impacts on the mental health of trans youth. Queer youth continue to have extreme disparities in their mental health. Even adults are not feeling that the United States is a safe place for them, and organizations are forming to help them flee our country. There are an astonishing 541 bills attacking the trans community which have been introduced in the United States in 2023. Here in Nebraska, as I understand the current bill, the focus has been on surgical care with explicit exclusions for the exact same procedures for cisgendered and, and intersex youth. It is precise and discriminatory targeting of trans youth and only trans youth. Blockers are not experimental treatments and are the same medicine--

KELLY: One minute.

RAYBOULD: —thank you— used for decades for precocious puberty and other indications. Hormone therapy is the exact same medicine used for adults who are at higher risk of clotting complication and other side effects, yet legislation makes no mention of them. It is clear to me and to Nebraskans, especially young Nebraskans, that these logical inconsistencies make clear that it is discriminatory in effect even if not in intent. Please hear me. Dozens and dozens of my physician colleagues, we have dedicated our lives and sacrificed countless hours to protect and serve patients. We've risked our physical health and taken damage to our mental health by losing sleep, routinely facing intense situations that would make normal people vomit or pass out, willingly putting our health and our lives on the line through a worldwide pandemic, which has taken over a million Americans and bearing witness to tragedy and death. Please believe me when I say that our commitment is to life.

KELLY: That's your time, Senator.

RAYBOULD: Thank you, Mr. President.

**KELLY:** Thank you, Senator Raybould. Senator Machaela Cavanaugh, you're recognized to speak.

M. CAVANAUGH: Thank you, Mr. President. We have about 14 minutes left on this bill. Yeah, 12:05. Yeah. The comments-- I just-- I said this--I think I made this comment on Wednesday. I'm not going to unpack your comments. It is -- and, you know, when people make comments on the mike that are very hyperbolic, I get emails, I get text messages because words matter. And when people say things that are so "traumatizingly" hurtful, I get lots and lots and lots of emails and text messages and, yeah. I was just-- I had it sitting here, don't know where I put it. I just wanted to share-- that's what I was looking for but I don't know where I set it down. I have too many papers now, so I'll come back another time on the mike to share. But I wanted to share the, the hotline number for The Trevor Project, because a lot of people, a lot-- Nebraska is watching and the country is watching today. And a lot of people are in pain, in a lot of pain and I, I want to make sure that people have access to the resources that they need because clearly, senators are going to be vicious in their language today and they're going to say really hurtful things. So I want to make sure that people have access to resources. So I will look it up and I will share it. But please, anyone watching, anyone listening inside the Chamber, outside the Chamber, at home, if you are struggling, please don't struggle alone. If you are hurting, please don't hurt alone. It is-- it's OK to get help. It's OK to get help. This bill is about mental health and the irony of a senator who represents a rural part of the state giving a story about the need for more investment in mental health while they're also going to vote to drive healthcare out of the state is not lost on me. Also, voting to inflict emotional harm on vulnerable people. But I do think we should pass LB276. But I don't think that anyone who votes for LB276 should pat themselves on the back, like you have done something good for healthcare when you're voting for LB574, because you are destroying people's lives. And you can use idiotic sayings like panic porn to describe what I am talking--

KELLY: One minute.

M. CAVANAUGH: --about, but you are destroying people's lives, and your stupid quips don't change that. You're destroying lives of people in this Chamber. You're destroying lives of people who work for us. You're destroying the lives of lots of people in this building that work in this building. But please give them a piece of candy. This is just such a hard day. It's such a hard day. It's so much harder than I thought it was going to be. I guess I knew it was going to be hard, it just feels-- if you are hurting, please don't hurt alone.

KELLY: That's your time, Senator.

M. CAVANAUGH: Thank you.

**KELLY:** Thank you, Senator Cavanaugh. Senator Hunt, you're recognized to speak.

HUNT: Thank you, Mr. President. I just learned that out in the Rotunda they have monitors that they've moved out so people can see us and I don't think I've ever seen that before. They have monitors sometimes in overflow rooms for hearings, but I've never seen them out in the Rotunda. So hi, guys. I'm glad that you're all here. No matter what side you're on, I'm glad you're engaging in the civic process and I hope we have something to celebrate after today. Do you-- I mean, my colleagues aren't here, I don't know where they went, but they have-you have the opportunity to save lives today. Your present, not voting, you checking out and going to your grandson's preschool graduation, you checking out and going to let your knee rest up or recover from surgery or whatever it is you're going through in your personal life, go get a pedicure on me. Go do literally anything else. And just by doing that, you will have saved lives today. I see parents of trans kids and folks up in the balcony nodding. They know that's right. They know that's right. This isn't about the access to the healthcare-- it is, it is definitely about that, but it's about many things. It's also about just the rhetoric and just the introduction of this bill and just the anti-gay, bigoted vote you are taking and how it affects these families. We've lost too many people in our trans community over the last few years, and that was before we ever had an anti-trans bill even introduced in the Nebraska Legislature. We lost a few important people as the city of Lincoln was considering their anti-discrimination ordinance. And this is a community in danger and your present, not voting or taking a walk or voting no today is going to save lives. We're in a biennium. You're going to take another bite at the apple on an abortion ban on, you know, any bans on LGBTQ rights or trans healthcare. You're going to keep going at it. But by voting no or present, not voting today you will save lives. This physician emailed us, Scott Shipman, MD, MPH, and I want to finish reading what he said. I like that he used this analogy calling this type of one-size-fits-all legislation going nuclear. And he talked about in medical school, they're taught not to use, like, these really broad spectrum antibiotics when a, a less dangerous, cheaper, easier, smaller antibiotic will do to kill, you know, the infection or the-to solve the problem that the patient's having. And he says I can't help but think of legislative solutions to medical care challenges as similarly going nuclear, especially when we're dealing with a, an amendment on a bill that was-- that we got four days ago that was put together without any input from physicians, any input from medical

professionals, against the advice of the American Medical Association, the American Psychological Association, the American Academy of Pediatrics, every expert. And this whole letter, you know, that's getting more signatories by the minute of licensed healthcare providers, verified to be in Nebraska, against this bill. Dr. Shipman continues: I call on Nebraska's healthcare professionals and patient advocates to join together to take a stand and be heard on the predictable failings--

KELLY: One minute.

HUNT: --of legislative solutions to nuanced medical care decisions. Political grandstanding in these situations will have dire implications for patients. It will lead to more overt healthcare professional shortages in Nebraska-- and, Senator Erdman, this isn't a threat. I don't want to hear your threats that people are going to leave Nebraska. It's not a threat. It's a promise-- as providers seek to practice elsewhere in states where they needn't find themselves faced with crudely implemented laws that broadly restrict delivery of care, even care that is in the best interest of their patients. Thank you, Mr. President.

**KELLY:** Thank you, Senator Hunt. Senator Conrad, you're recognized to speak.

CONRAD: Thank you, Mr. President, and, again, good morn-- oh, good afternoon, colleagues. We've passed the, the noon mark. So I wanted to provide just a little bit more context for some of my thinking in regards to where we are today and where we'll be together on LB574 again in just a few hours. So as I was catching up on my reading over the last couple of, of weeks and months, there was an article, perhaps in The Atlantic, I think it was, talking about how we're in an era of total politics, meaning that political acrimony and political weapon-weaponization has been injected into everything, not just our politics but into everything, and about how that was fueling the acrimony and toxicity in our politics. That by having our news infused with a political slant instead of an objective rendering of what's happening in our world so that each independent, independent thinker in our community can assess what's happening in their world and draw their own conclusions without a partisan bent. Whether that is what's happening in terms of bureaucratic institutions that were established, again, to try and insulate against the political institutions, things like a board of health, right, that we saw weaponized during COVID, and that we're seeing weaponized during this debate in Nebraska. Where we've seen politics become toxic politics, in fact, so many areas of

our lives that it's taking up too much brain space in people's heads. It's too toxic, it's too acrimonious, and what happens is it becomes another form of voter suppression. People who are busy with their lives and who are great Nebraska neighbors say this isn't for me. It's too much. It's too much. I'm going to go to work. I'm going to get my kids to school. I'm going to help my neighbors just like I've always done. But I'm not interested in what's happening in politics because it's too much and it's not speaking to me. So we see this play out in Nebraska this year on LB574. Right before General File, we saw a statement issued by the Nebraska Board of Health, a seemingly innocuous institution, to help govern key issues in healthcare policy. The political appointees organized in unprecedented ways to rush through a policy statement. And it's not to say that these Nebraskans aren't thoughtful, caring Nebraskans, but I want you to know who was a part of that. And I did an open records request to figure out how it happened and that's been the subject of media reports. Our former colleague, Senator Kuehn, is a veterinarian, and he was helping to lead the effort. He was supported by Mr. Bud Synhorst, who is formerly a lobbyist for alpaca owners and now represents a small business association.

KELLY: One minute.

CONRAD: A veterinarian and a lobbyist for alpacas pushed behind the scenes to weaponize our Board of Health to issue a policy statement in support of LB574 that's in contravention of widely established medical practice. And now it has been put forward that a political appointee, Dr. Tesmer, I hope I'm pronouncing his name right, who again, I'm sure is a caring doctor and a good Nebraska neighbor, is going to be charged with making these decisions. He's a political appointee. He is an ear, nose, and throat doctor. When similar schemes have been put forward in Florida and otherwise, the political weaponization has come to light when challenged and it has not provided a thoughtful approach to ensuring care—

KELLY: That's your time, Senator.

CONRAD: --or public safety.

**KELLY:** Thank you, Mr. President.

**KELLY:** Thank you, Senator Conrad. Senator Machaela Cavanaugh, you're recognized to speak and this is your final time before your close.

M. CAVANAUGH: Thank you, Mr. President. Oh, gosh, yeah, I was, like, what was I-- I knew what I was going to talk about and I forgot. OK. My staff is calling my intercom but I'm on the microphone so I'll call -- Tanner, I will call you when I'm done. I love my mom so much. While I was talking the last time she texted me The Trevor Project information. Thank you, Mom. She's such an amazing person, like, one of the most loving, kind, compassionate people you could ever have the great honor and privilege of interacting with. And she is Catholic, she raised eight kids, she sent us all to Catholic school, and she hates LB574 and LB626. Hates it. Can't believe this is what's happening in her chosen state. Because my mom's not from here, she came here for college. She met my dad. He was in law school. She was an undergrad. And she chose to live here; she chose to raise her eight kids here. She's a Nebraskan by choice and has been for over 50 years. She and my dad have been married for 50, it will be 54 years this August, 54 years and they have two weddings. Yes, two weddings. They got married in Germany, where my dad was stationed. And they got married two days in a row, once in the courts and once in the church. We observe the church wedding as the, like, official, official date, but we also celebrate the, the first one, too. It's also my dad's birthday, so. But to those who need it, from Kate Cavanaugh, my mom, if you are suffering, please don't do it alone, you can text 678678 or you can call 866-488-7386. You matter. You matter to me. Even if I haven't met you, you matter to me. So if you are suffering, please do this for me and text or call those numbers, because I am here fighting for you and I need you to take care of yourself. And you're loved. And thank you, Mom, for literally everything. You are so amazing and you have built a beautiful life for your children and taught us what true love, kindness, and compassion look like. But it's probably because of that that I'm crying so much today, because you taught me--

**KELLY:** One minute.

M. CAVANAUGH: --how to do this work with heart, and you can't or you shouldn't do it without heart. So thank you, Mom. I love you. We're, I think, about cloture on this bill. Oh, that was the thing I wanted to mention earlier. Senator Ben Hansen did not do a call of the house on the A bill, and so I did it for him. Thankfully, it didn't fail. Colleagues, on cloture, you still have to have 33. And if we're not on Final Reading, everyone doesn't have to be in the Chamber. So please remember to do a call of the house when they ask for what purpose do you rise, a motion for cloture, call of the house. You don't have to do a roll call vote, but you should definitely do a call of the house. You know me, I love process. And as much as this place devastates me—

KELLY: That's your time, Senator.

M. CAVANAUGH: -- I still want it to function. Thank you.

**KELLY:** Thank you, Senator Cavanaugh. Members, please return to your seats for Final Reading. Mr. Clerk, you have a motion on the desk.

CLERK: I do, Mr. President, Senator Wishart would move to invoke cloture on LB276e pursuant to Rule 7, Section 10.

KELLY: Senator Wishart, for what purpose do you rise?

WISHART: Call of the house, roll call vote, reverse order.

**KELLY:** There's been a request for a roll call vote. Members, please find your seat. We're on Final Reading. All unexcused members are present. Members, the first vote is to invoke cloture. Mr. Clerk.

CLERK: Senator Wishart voting yes. Senator Wayne. Senator Walz voting yes. Senator von Gillern voting yes. Senator Vargas voting yes. Senator Slama. Senator Sanders voting yes. Senator Riepe voting yes. Senator Raybould voting yes. Senator Murman voting yes. Senator Moser voting yes. Senator McKinney voting yes. Senator McDonnell voting yes. Senator Lowe voting yes. Senator Lippincott voting yes. Senator Linehan voting yes. Senator Kauth voting yes. Senator Jacobson voting yes. Senator Ibach voting yes. Senator Hunt voting yes. Senator Hughes voting yes. Senator Holdcroft voting yes. Senator Hardin voting yes. Senator Hansen voting yes. Senator Halloran voting yes. Senator Fredrickson voting yes. Senator Erdman voting yes. Senator Dungan voting yes. Senator Dover voting yes. Senator Dorn voting yes. Senator DeKay voting yes. Senator DeBoer voting yes. Senator Day voting yes. Senator Conrad voting yes. Senator Clements voting yes. Senator Machaela Cavanaugh voting yes. Senator John Cavanaugh voting yes. Senator Briese voting yes. Senator Brewer voting yes. Senator Brandt voting yes. Senator Bostelman voting yes. Senator Bostar voting yes. Senator Bosn voting yes. Senator Blood voting yes. Senator Ballard voting yes. Senator Armendariz voting yes. Senator Arch voting yes. Senator Albrecht. Senator Aguilar voting yes. Vote is 46 ayes, 0 nays, Mr. President, on the motion to invoke cloture.

**KELLY:** Cloture is invoked. Members, the next vote is on the motion to return to Select File for adoption of FA151. Been a request for a roll call vote. Mr. Clerk.

CLERK: Senator Aguilar voting no. Senator Albrecht. Senator Arch voting no. Senator Armendariz voting no. Senator Ballard voting no.

Senator Blood voting no. Senator Bosn voting no. Senator Bostar voting no. Senator Bostelman voting no. Senator Brandt voting no. Senator Brewer voting no. Senator Briese voting no. Senator John Cavanaugh voting no. Senator Machaela Cavanaugh not voting. Senator Clements voting no. Senator Conrad voting no. Senator Day voting no. Senator DeBoer voting no. Senator DeKay voting no. Senator Dorn voting no. Senator Dover voting no. Senator Dungan voting no. Senator Erdman voting no. Senator Fredrickson voting no. Senator Halloran voting no. Senator Hansen voting no. Senator Hardin voting no. Senator Holdcroft voting no. Senator Hughes voting no. Senator Hunt voting no. Senator Ibach voting no. Senator Jacobson voting no. Senator Kauth voting no. Senator Linehan voting no. Senator Lippincott voting no. Senator Lowe voting no. Senator McDonnell voting no. Senator McKinney voting no. Senator Moser voting no. Senator Murman voting no. Senator Raybould voting no. Senator Riepe voting no. Senator Sanders voting no. Senator Slama. Senator Vargas voting no. Senator von Gillern voting no. Senator Walz voting no. Senator Wayne. Senator Wishart voting no. Vote is 0 ayes, 45 mays to return to Select File, Mr. President.

**KELLY:** The motion to return to Select File fails. Mr. Clerk, please read the bill.

**CLERK:** [Read LB276 on Final Reading.]

**KELLY:** All provisions of law relative to procedure having been complied with, the question is, shall LB276 pass with an emergency clause? A request for a roll call vote. Mr. Clerk.

CLERK: Senator Aguilar voting yes. Senator Albrecht. Senator Arch voting yes. Senator Armendariz voting yes. Senator Ballard voting yes. Senator Blood voting yes. Senator Bosn voting yes. Senator Bostar voting yes. Senator Bostelman voting yes. Senator Brandt voting yes. Senator Brewer voting yes. Senator Briese voting yes. Senator John Cavanaugh voting yes. Senator Machaela Cavanaugh voting yes. Senator Clements voting yes. Senator Conrad voting yes. Senator Day voting yes. Senator DeBoer voting yes. Senator DeKay voting yes. Senator Dorn voting yes. Senator Dover voting yes. Senator Dungan voting yes. Senator Erdman voting yes. Senator Fredrickson voting yes. Senator Halloran voting yes. Senator Hansen voting yes. Senator Hardin voting yes. Senator Holdcroft voting yes. Senator Hughes voting yes. Senator Hunt voting yes. Senator Ibach voting yes. Senator Jacobson voting yes. Senator Kauth voting yes. Senator Linehan voting yes. Senator Lippincott voting yes. Senator Lowe voting yes. Senator McDonnell voting yes. Senator McKinney voting yes. Senator Moser voting yes. Senator Murman voting yes. Senator Raybould voting yes. Senator Riepe

voting yes. Senator Sanders voting yes. Senator Slama. Senator Vargas voting yes. Senator von Gillern voting yes. Senator Walz voting yes. Senator Wayne. Senator Wishart voting yes. Vote is 46 ayes, 0 nays, 0 present, not voting, 3 excused, not voting, Mr. President.

**KELLY:** LB276 passes with the emergency clause. Mr. Clerk, for the next item on the agenda.

**CLERK:** Mr. President, LB276A, first of all, Senator Machaela Cavanaugh would move to return to Select File for a specific amendment, that being FA152.

KELLY: Senator Machaela Cavanaugh, you're recognized to speak.

M. CAVANAUGH: Oh, sorry. I was-- I was, like, wait, the bill is not up. It is, it's an A bill. OK. Goodness gracious. Strike Section 1 is what this is, as they all are, strike Section 1, so. You know, we moved through the budget, whatever day that was. Was that yesterday? Yes, we finished the budget yesterday. And I don't know how many people have been keeping track but you get this green sheet attached everyday to your agenda. And these A bills, as they're moving along like the ones we moved last night, so they show up on here. So let's see here. Yeah, so if you go to this -- the back page, it will have Final Reading. So it will have, like, and then Select File, how much money is on Select File. And so as we move those bills, the, the bottom line changes. So just flagging that for people as far as process goes. I know there was a-- rigorous questions around LB531 yesterday. Very rigorous. Somehow we can spend \$1 billion without much conversation whatsoever, but if Senators McKinney, Wayne, and Vargas want to help their communities, we got to make sure that every penny is going to be properly accounted for. So that was interesting to watch, not in a good way. But -- oh, it was underneath the agenda where I had my note on The Trevor Project hotline. And if you need help, please text 678678 or call 866-488-7386. Please do not suffer alone. This is a hard time for all of us and it is important that you are here and taking care of yourself. I've noticed that Senator Raybould has been passing out letters-- so I appreciate that-- from various medical professionals. I don't even know how many she has, but-- a lot? A lot more. A lot more. Oh, I mean, the potential is you could have over a thousand more, considering we have 1,068 names on this list from across the state. It's-- I mean, this list is one, two, three, four, five, six, seven, eight, eight pages of names, filled with names, three columns. Will their voices matter? Will they matter? They matter to me, matters to me that you all did this, matters to me that over a thousand people have in the medical profession in the

state have expressed their view on this. I have not heard from even a hundred medical professionals who support LB576 [SIC], let alone over a thousand, so. But I have heard from medical professionals who support LB576 [SIC]. They testified. None of them provided the healthcare in LB576 [SIC], either as amended or the original. None of them provided that healthcare. But the handful of medical professionals that testified in support of LB576 [SIC] are the medical professionals that I have heard from, so. Apparently, they carry the weight here. Well, the numbers keep growing. I keep getting updates on how many people are signing onto this healthcare professional letter, so. I was going to continue -- again, I have so many papers. What am I doing here? I have so many papers. I was going to continue reading the-- ah, here it is-- the names of the testifiers. Why? Because-well, honestly, I don't want to keep crying on the microphone and I don't want to make the young people who are impacted by this see me cry on the microphone. So I'm going to read names. All right, the Reverend Dr. E. Scott Jones from the Nebraska Conference of United Church of Christ, Ash, Camie Nitzel, Kindred Psychology. I think many of you met with Camie. Maybe not, I don't know. She certainly came and testified. Elizabeth Wendal-- sorry, Wendal, I know Wendals that are doctors. OK, Elizabeth Weedin, John McCollister, Sheri Shuler, Alex Dworak, Ross Manhart, Meghan Sheehan, Alex Hamric, Lauren Maskin, Jill Dibbern Manhart, Shannon Godsil, Natasha Gallett, Shannon Haines, Spencer Robinson, Ronald Fussell, Maeve Malice, Sapphire Smith, David Greiner, Mary Sullivan, Eliana Siebe-Walles, Jeremy Eriksen, Steph Engelbart, Kadence Ann Tomasch, Tiffany Weiss, Echo Koehler, Sam Whitt, Jessie McGrath, Evelynn Freeman, Reverend Juniper Meadows. And I remember Reverend Juniper Meadows was the last person to testify. Now these are the individuals who showed up to testify but were not allowed that were in opposition. There's also-- we did compile the list of those that showed up to testify in support that were not allowed. But if you want those names, you can look at them yourself on the minority statement. Ava Schmidt, Jeff Schmidt, Brenda Alonso, Zach Baker, Skyler Black, Chueqa Yang, Skyler -- oh, Skyler is on there twice, Daron Coulson, Bud Mathey, Darcy Covert, Victory Klafter, Jill Heggen, Jane McGill. Hey, Jane, love you. Autumn Woolpert, Grace Jaworski--

**KELLY:** One minute.

M. CAVANAUGH: --thank you-- Ridley Goud, Kay Horwath, Grace Vandercoy, Arreya Ahrom, Em Meyer, Amanda Koeber, Carmen Smith, Henry Nelson, Keana Barnes, Tia Manning, Natalia Tu, Jane Seu, Dana Maaske, Megan Thorn, Aurora Sater, John McGill, also goes by Jack, Miranda Rogers, Wes Staley, Brenda Schmidt, Mary Ensz, Emily Kaemmerer, Karen

Williams, Josh Girrod, Renee Garcia, Kayla-- Kayleigh Casey, Charles Buckman, Gina May, Sophie Holtz, Freedom Thompson, Linda Duckworth, Alex Crawford, Jessica Sult, Zoe Miller, Jay Irwin, Darcia--

KELLY: That's your time, Senator.

M. CAVANAUGH: Thank you.

**KELLY:** While the Legislature is in session and capable of transacting business, I propose to sign and do hereby sign LB276 with the emergency clause. Senator Conrad, you're recognized to speak.

CONRAD: Thank you, Mr. President. Good afternoon, colleagues. Sorry, I was across the Chamber and just had a, a moment of delay before my time in the queue arrived. So, colleagues, as per usual as one of the senior members, second only to my friend Senator Aguilar in this body, I wanted to provide a little bit of history just because I think it can be instructive and provide some context as well. And I want you to think about it as objectively as you can. I appreciate and understand that we have deeply held, authentically held different points of view on access to gender-affirming care, access to abortion, and reproductive justice. I understand that. I respect your point of view and your ability to represent your constituents and the state as you see fit. But I want you to recognize that when we make changes, policy decisions, that change, that alter, how people practice medicine and how we set policy regarding reproductive rights, we don't do it overnight. We don't do it overnight. It's too complex. Every pregnancy is different, every healthcare practice is different and we need-- if we're not going to listen to doctors in regards to rejecting this ban, we should at least be thoughtful about ensuring our doctors don't incidentally create or have to face unnecessary risk. You can honor your commitment to your ideals and your constituents, but I'm asking you, and we don't need an amendment, we don't need another round of debate and we can talk through that more, I'm asking you to think about thoughtful implementation because it's what we've always done. Thirteen years ago when Nebraska set a standard for the country, and I was here and my friend Speaker Flood introduced the Pain-Capable Abortion Ban Act -- Pain-Capable Child Abortion Ban Act, I think, was the title of it. It was LB1103, back in 2010. I disagree with that policy because I think restricting care for pregnancies later are actually the most heart-wrenching because that's when we see fetal anomaly and medical risk situations pop-up. Nevertheless, this body saw fit to adopt that policy, and we were the first in the country to do so with a "previability" gestational ban and a basis on whether or not the preborn can experience pain. So at that time, it would have

banned care for, I think less than 5 percent of pregnancies, maybe even less than 1 or 2 percent. But we recognized it was new and it was novel and people needed time to digest. And Speaker Flood helped to negotiate--

**KELLY:** One minute.

CONRAD: --an effective date, far beyond an emergency clause. In fact, if you look at the slip law copy of LB1103, you can see it did not have an E clause. The act became effective on October 15, 2010, and it was approved by the Governor in April. That was carefully negotiated to ensure no one ran afoul of the new law and had understanding and ability to implement the policy choice. Thank you, Mr. President.

KELLY: Thank you, Senator Con--

CONRAD: If you look-- oh, OK.

**KELLY:** --thank you, Senator Conrad. Senator Raybould, you're recognized to speak.

RAYBOULD: Thank you, Mr. President. Here is a letter from a, a resident in Omaha thanking me for my advocacy, but also talking about what it means to her. I am an OB-GYN resident physician in Omaha, and I can't tell you what this means, not only for Nebraska but regionally and countrywide. Thank you for fighting for physician safety, the patient-physician relationship, and ensuring we have the ability to practice medicine that will best serve our patients. In my short time as an OB-GYN, I have seen many gray zones in situations that present themselves that could be affected by a heartbeat bill. Personally, it would crush me not to be able to offer care for a patient in need. Thank you for listening to healthcare workers and Nebraskans who know this could be our reality. As an OB resident, I can tell you that passage of this bill absolutely would affect our applicant pool for medical students applying for OB-GYN residency. When I was applying for residency, I did not consider applying to states that had strict restrictions for women's reproductive healthcare. Why would someone going into this field want to learn and train in a state that limits our skills and treatment options and values forced pregnancy rather than the maternal infant morbidity and mortality? Programs in that position have to outsource their residents to other states for abortion procedural education, which is not an ideal situation. It's not an attractive attribute of a program that I assure you would put Nebraska lower on their list. In short, I am one Nebraska transplant that is very grateful for your work. Here is another letter from a

physician who says: My wife is currently in residency on an OB-GYN rotation at UNMC. Between all the residents she's in contact with, they are all concerned about this bill passing, not necessarily just because of the 6-week versus 10-week versus 12-week confusion, it's just so vague. They would prefer to leave the existing 20-week law in place. It's not just about the criminal penalty. I know there is some disagreement about it, if there is a criminal penalty or not. This alone says that this is bad legislation. It should be crystal clear and not for something to clarify next legislation -- next legislative session. And even if there is no criminal penalty, they could lose their license. That is, that is career suicide. These are early doctors in training with \$500,000 in student loan debt. Losing their license would effectively end their career and bankrupt them after nearly a decade in study and practice. If these residents are from somewhere else, why would they stay in a state where they could potentially be faced with either losing their credentials or making the medically correct decision or not understanding the vague law that they must follow? Not to mention, these decisions could be made in the chaos, chaos of a life or death situation. Please do not vote for LB574 or LB626. Please at least be a not voting senator. We risk losing the best and the brightest over a bill that would impact a very small minority in very complicated circumstances. We have family all over the country. We were considering buying a house here. But if the Nebraska Legislature insists on inserting itself in such personal medical decisions, we have plenty of opportunities elsewhere. Please shift concentration to childcare affordability and housing affordability. We are more concerned about that, if we can grow our lives here in Nebraska or not. Here's the third physician. She is also an OB-GYN physician in Omaha. I am from--

KELLY: One minute.

RAYBOULD: --thank you-- I am from Grand Island, Nebraska, and would love to stay in Nebraska to practice in the future. However, this bill makes me think otherwise. I strongly oppose LB574 with AM1658 and I encourage you to do the same. Please know this bill will severely limit the healthcare to Nebraskans, the training of Nebraska physicians, and the freedom and rights of women and people in this great state. Passing this bill will limit the amount of OB-GYN physicians wanting to practice in this state due to limiting our ability to take care of our patients. Please leave patient care to the physicians and patients. Thank you, Mr. President.

**KELLY:** Thank you, Senator Raybould. Senator Machaela Cavanaugh, you're recognized to speak.

M. CAVANAUGH: Thank you, Mr. President. Trans people belong here. We need trans people. We love trans people. That's what they're saying out there. They're standing in a circle in the Rotunda saying that over and over again. Trans people belong here. We need trans people. We love trans people. Trans people belong here. We need trans people. We love trans people. Trans people belong here. We need trans people. We love trans people. Trans people belong here. We need trans people. We love trans people. Trans people belong here. We need trans people. We love trans people. Trans people belong here. We need trans people. We love trans people. Trans people belong here. We need trans people. We love trans people. Trans people belong here. We need trans people. We love trans people. Trans people belong here. We need trans people. We love trans people. Trans people belong here. We need trans people. We love trans people. Trans people belong here. We need trans people. We love trans people. Trans people belong here. We need trans people. We love trans people. Trans people belong here. We need trans people. We love trans people. Trans people belong here. We need trans people. We love trans people. Trans people belong here. We need trans people. We love trans people. Trans people belong here. We need trans people. We love trans people. Trans people belong here. We need trans people. We love trans people. Trans people belong here. We need trans people. We love trans people. Trans people belong here. We need trans people. We love trans people. Trans people belong here. We need trans people. We love trans people. Trans people belong here. We need trans people. We love trans people. Trans people belong here. We need trans people. We love trans people. Trans people belong here. We need trans people. We love trans people. Trans people belong here. We need trans people. We love trans people. Trans people belong here. We need trans people. We love trans people. Trans people belong here. We need trans people. We love trans people. Trans people belong here. We need trans people. We love trans people. Trans people belong here. We need trans people. We love trans people. You matter. You matter. And I am fighting for you. And I will not stop. I will not stop today. I will not stop tomorrow. You are loved. You matter. You belong here.

KELLY: Senator Day, you're recognized to speak.

DAY: Thank you, Mr. President. And thank you, Senator Cavanaugh. I wholeheartedly agree. And please remember, if you're listening, you do not need the government's permission to be who you are. Whatever happens today, it doesn't change anything about you. It doesn't change anything about your right to exist. You do not need the government's permission to be who you are. You are loved by so many that you don't even know. And no matter what happens today, we will continue to fight every day. Every day. You do not need the government's permission to

exist. You do not need the government's permission to be who you are. I have been trying to get on the mike and talk to anyone who is willing to listen. We have heard about the potential legal issues with LB574. We have heard about the medical community's overwhelming opposition to both of the provisions in LB574. And I would like to highlight the business community's opposition to LB574. I mentioned a few of these things the other night, but I'm hoping to catch a few more people listening today. The anti-trans bill that was passed in North Carolina cost them \$3.76 billion in lost business over 12 years. They were going to have a brand new PayPal facility built in their state that PayPal then declined to build, that would have brought \$2.66 billion into the state's economy, because of the anti-trans bill. Nebraska, as we know, as we talk about all the time, because we talk about it when it comes to tax incentives and tax breaks, Nebraska has a very, very serious problem with losing educated workforce. One of the primary drivers of negative out-migration of educated workers from Nebraska to other places in the United States is job opportunities and pay. The other that's often cited is the political climate. LB574 exacerbates both of those things. We will lose corporations. We will no longer be on the list of states to come to for potential new locations. And that was even cited by Tim Burke from the Omaha Chamber of Commerce. He has specific examples of that already happening.

**KELLY:** One minute.

DAY: Mr. Burke said he received at least two messages from companies that have crossed Omaha off their list of annual meeting sites because of the bills being considered in the Legislature this year. Another potential employee moving, potentially moving into the state for a job declined the job, specifically because of the political climate. We already have a problem here and we are making it worse. Is this the future that you want to leave for your children and your grandchildren, being forced to move out of state for job opportunities? For decent pay? Because that's exactly what's already happening and it will continue to happen and get worse if you vote green on LB574 today.

KELLY: That's your time, Senator.

DAY: Thank you, Mr. President.

**KELLY:** Thank you, Senator Day. Senator Conrad, you're recognized to speak.

CONRAD: Thank you, Mr. President. Good afternoon again, colleagues. I ran out of time at my last opportunity on the mike and in the queue to talk a little bit about the historical perspective in terms of how our state has adopted, adopted and implemented policies in regards to restrictions to reproductive rights and access to abortion care for Nebraskans who need it. So in addition to being the first in the country to adopt a 20-week ban and "previability" ban back in 2010, there was a carefully negotiated understanding that changing the law impacting complex medical care decisions for later in pregnancy, which impacted, I think, less than 1 percent of those seeking care, we needed time to digest it and make sure that we didn't cause any chaos or confusion in terms of implementing our stated public policy as a state, as emanating from the Legislature in LB1103 from 2010. So that had an effective date months after it was signed by the Governor. So we don't have to go all the way back to 13 years ago, we can also look back to just three years ago in LB814 that was brought forward in 2020 by Senator Suzanne Geist. It was a ban on a method of abortion care that was common in the second trimester. So if you look at LB814 from 2020, you can see, as well, there was no emergency clause. It was estimated that changing or banning or prohibiting a type of medical care provided commonly in the second trimester would impact a very small amount of care, maybe, again, less than 5 percent or 1 percent and there was no emergency clause. Thirteen years ago when we banned care, there was no emergency clause. Three years ago when we banned care, there was no emergency clause. I disagree with those policies because I know as a mom every pregnancy is different. I know as a policymaker I can't walk in other people's shoes, and that a one-size-fits-all prohibition on care has a lot of unintended consequences, including for people who have very, very wanted pregnancies when things go very, very wrong. So over the course of our political history in just these two examples, we've recognized that when we change the standard of care and when we prohibit the ability for doctors to provide care, even in the most heart-wrenching of situations to save a mother's life or to deal--

**KELLY:** One minute.

CONRAD: --with a pregnancy that's incompatible with life-- thank you, Mr. President-- we don't do it overnight. And here, we're changing two aspects of healthcare without clarity on criminal penalties, with no exception for fetal anomaly at a much earlier rate that's going to impact a lot more people in both instances, for gender-affirming care and reproductive rights, and we're doing it overnight. That's not thoughtful legislating. We have the ability to fix this without sending it back for another round of debate. And we need to start that

conversation together in earnest. You can adhere to your ideals, but we have to legislate thoughtfully to ensure there are not additional unintended consequences. Thank you, Mr. President.

**KELLY:** Thank you, Senator Conrad. Mr. Clerk, you have a motion on your desk.

CLERK: I do, Mr. President, Senator Wishart would move to invoke cloture on LB276A pursuant to Rule 7, Section 10.

**KELLY:** Senators, please return to your desk. We are on Final Reading. All unexcused members are present. Senator Wishart, for what purpose do you rise?

WISHART: Roll call vote, reverse order.

**KELLY:** Members, the first question is whether or not to invoke cloture. There's been a request for a roll call vote. Mr. Clerk.

CLERK: Senator Wishart voting yes. Senator Wayne. Senator Walz voting yes. Senator von Gillern voting yes. Senator Vargas voting yes. Senator Slama. Senator Sanders voting yes. Senator Riepe voting yes. Senator Raybould voting yes. Senator Murman. Senator Moser voting yes. Senator McKinney voting yes. Senator McDonnell voting yes. Senator Lowe voting yes. Senator Lippincott voting yes. Senator Linehan voting yes. Senator Kauth voting yes. Senator Jacobson voting yes. Senator Ibach voting yes. Senator Hunt voting yes. Senator Hughes voting yes. Senator Holdcroft voting yes. Senator Hardin voting yes. Senator Hansen voting yes. Senator Halloran voting yes. Senator Fredrickson voting yes. Senator Erdman voting yes. Senator Dungan voting yes. Senator Dover voting yes. Senator Dorn voting yes. Senator DeKay voting yes. Senator DeBoer voting yes. Senator Day voting yes. Senator Conrad voting yes. Senator Clements voting yes. Senator Machaela Cavanaugh voting yes. Senator John Cavanaugh voting yes. Senator Briese voting yes. Senator Brewer voting yes. Senator Brandt voting yes. Senator Bostelman voting yes. Senator Bostar voting yes. Senator Bosn voting yes. Senator Blood voting yes. Senator Ballard voting yes. Senator Armendariz voting yes. Senator Arch voting yes. Senator Albrecht voting yes. Senator Aguilar voting yes. Senator Murman voting yes. 47 ayes, 0 nays, Mr. President, to invoke cloture.

**KELLY:** Cloture is invoked. Members, the next question is the motion to return to Select File for amendment. All those in favor vote ayerequest for a roll call vote. Mr. Clerk.

CLERK: Senator Aguilar voting no. Senator Albrecht voting no. Senator Arch voting no. Senator Armendariz voting no. Senator Ballard voting no. Senator Blood voting no. Senator Bosn voting no. Senator Bostar voting no. Senator Bostelman voting no. Senator Brandt voting no. Senator Brewer voting no. Senator Briese voting no. Senator John Cavanaugh voting no. Senator Machaela Cavanaugh not voting. Senator Clements voting no. Senator Conrad voting no. Senator Day voting no. Senator DeBoer voting no. Senator DeKay voting no. Senator Dorn voting no. Senator Dover voting no. Senator Dungan voting no. Senator Erdman voting no. Senator Fredrickson voting no. Senator Halloran voting no. Senator Hansen voting no. Senator Hardin voting no. Senator Holdcroft voting no. Senator Hughes voting no. Senator Hunt voting no. Senator Ibach voting no. Senator Jacobson voting no. Senator Kauth-- Senator Kauth voting no. Senator Linehan voting no. Senator Lippincott voting no. Senator Lowe voting no. Senator McDonnell voting no. Senator McKinney voting no. Senator Moser voting no. Senator Murman voting no. Senator Raybould voting no. Senator Riepe voting no. Senator Sanders voting no. Senator Slama. Senator Vargas voting no. Senator von Gillern voting no. Senator Walz voting no. Senator Wayne. Senator Wishart voting no. Vote is 0 ayes, 46 nays, Mr. President, to return to Select File.

KELLY: Thank you, Mr. Clerk. Mr. Clerk, please read the bill.

**CLERK:** [Read LB276A on Final Reading.]

**KELLY:** All provisions, all provisions of law relative to procedure having been complied with, the question is, shall LB276A pass with the emergency clause? There's been a request for a roll call vote. Mr. Clerk.

CLERK: Senator Aguilar voting yes. Senator Albrecht voting yes. Senator Arch voting yes. Senator Armendariz voting yes. Senator Ballard voting yes. Senator Blood voting yes. Senator Bosn voting yes. Senator Bostar voting yes. Senator Bostelman voting yes. Senator Brandt voting yes. Senator Brewer voting yes. Senator Briese voting yes. Senator John Cavanaugh voting yes. Senator Machaela Cavanaugh voting yes. Senator Clements voting yes. Senator Conrad voting yes. Senator Day voting yes. Senator DeBoer voting yes. Senator DeKay voting yes. Senator Dorn voting yes. Senator Dover voting yes. Senator Dungan voting yes. Senator Erdman voting yes. Senator Fredrickson voting yes. Senator Halloran voting yes. Senator Hansen voting yes. Senator Hughes voting yes. Senator Hunt voting yes. Senator Ibach voting yes. Senator Jacobson voting yes. Senator Kauth voting yes. Senator Linehan

voting yes. Senator Lippincott voting yes. Senator Lowe voting yes. Senator McDonnell voting yes. Senator McKinney voting yes. Senator Moser voting yes. Senator Murman voting yes. Senator Raybould voting yes. Senator Riepe voting yes. Senator Sanders voting yes. Senator Slama. Senator Vargas voting yes. Senator von Gillern voting yes. Senator Walz voting yes. Senator Wayne. Senator Wishart voting yes. Vote is 47 ayes, 0 nays, 0 present, not voting, 2 excused, not voting, Mr. President.

**KELLY:** LB276A with the emergency clause passes. Mr. Clerk, for next item.

CLERK: Mr. President, next bill on the agenda, LB565e. First of all, Senator Machaela Cavanaugh would move to— excuse me. Senator Hunt would move to recommit the bill, priority motion, would move to recommit LB565 to committee.

KELLY: Senator Hunt, you're recognized to open on your motion.

HUNT: Thank you, Mr. President. I want to finish this letter from Dr. Scott Shipman. Everyone's checking out. OK. I want to finish this letter from Dr. Scott Shipman. He says, I call on Nebraska's healthcare professionals and patient advocates to join together to take a stand and be heard on the predictable failings of legislative solutions to nuanced medical care decisions. Political grandstanding in these situations will have dire impacts for patients. It will lead to more overt healthcare professional shortages in Nebraska as providers seek to practice elsewhere, in states where they needn't find themselves with crudely implemented laws that broadly restrict delivery of care, even if that care is in the best interest of their patients. Physicians take an oath to do no harm. Policymakers do not. I hope that Nebraska's policymakers have the compassion and the will to step back from the political frenzy and recognize the problems created by blunt legislative solutions that restrict physicians' and patients' ability to determine optimal individual care plans. Reasoned policymaking that respects the equitable pursuit of health and well-being should be the Nebraska way of true leadership. Here's a letter from yesterday. This is from Dr. Libby Crockett, Dr. Kathryn Kenna, Dr. Molly Johnson, Dr. Erica Haake and Dr. Matthew Brennan, who are obstetricians and gynecologists in Grand Island. We are board-certified obstetrician-gynecologists in Grand Island. We are asking you today to oppose LB574, amended LB574 and any abortion bans. On occasion, we see trans kids in our clinic, typically for problems with their periods. Often, these kids and their parents just have questions about where they can get care without judgment and shame and

who can answer their questions with clarity and compassion. They also have many fears, not least of which is their fear for personal safety. Many are struggling with depression and bullying. Parents deeply feel the real danger for their children to commit suicide or be targeted by peers or even adults, for violence. LB574 and the rhetoric around it has just made that situation for these families so much worse. Senator Aquilar, this one's for you. This one's for you, Senator Aquilar. This is from physicians in Grand Island. Senator Aguilar, LB574 and the rhetoric around it has made the situation for these families so much worse. If passed, it will continue to exacerbate dangerous stigma and prevent kids from accessing necessary care. In Nebraska, kids do not get bottom surgery as part of transgender care, as Senator Slama has falsely stated, for example. As physicians who have had long-standing practices in Nebraska, we do not think that individualized medical care should be up to the politically-appointed chief medical officer of the state, especially if they do not have any formal medical training on that particular area of medicine. This bill does nothing to protect kids and in fact, will have the opposite effect. A 12-week last missed period dating, so a 10-week ban on abortion is an arbitrarily selected time point. Relatively few abortions happen after this time in pregnancy, but when they do, it is typically because of a new diagnosis of a maternal medical condition, pregnancy complication or fetal anomaly. Banning abortion at this gestational age is just cruel for families that are already grieving and puts their health and well-being at risk. That's what you guys really don't understand. When we're banning abortions after 12 weeks, by and large, the people you're hurting the most are people like Senator Jacobson's family, who would have then had to travel out of state to get a D and E procedure, when they had a medical emergency during that pregnancy. These are typically parents who have very wanted pregnancies, who have started putting together a baby room, who have probably announced the pregnancy, who are probably -- have friends that are planning baby showers. That's who this ban hurts the most, because these people with medical emergencies, when they come into the hospital and doctors tell them, sorry, we can't give you care, we could lose our license. We could face criminal penalties. That's what we're going to be faced with in Nebraska, and that's what we're already seeing happen play out in other states. These gynecologists, these medical doctors from Grand Island continue: In addition, it puts physicians caring for them in a very complicated logistical situation. The language in the amended LB574, which specifically targets abortion, does imply that there will be repercussions for physicians who perform these abortions, but it is not clear what those consequences will be. As a result, it will default to criminal charges. This is poorly written legislation that

is anti-physician. Just this year, family medicine residents are no longer required to learn obstetrics as part of their training, per national guidelines. Well, in Senator Jacobson's situation, that would be really bad if they had had to see a doctor who didn't have training in obstetrics for that difficult pregnancy. As all obstetrical care moves to obstetricians only in the coming decades, it is critical that we do what we can to make Nebraska an appealing state for new OB-GYN graduates to move to for work. However, a recent study published by the Association on a Medical -- American Medical Colleges, that showed that fourth-year medical students, after the Dobbs v. Jackson decision, that was the thing that overturned Roe v. Wade, were already ranking residency programs to reduce their chances of matching in states with severe abortion bans, especially in obstetrics and gynecology and emergency medicine. Bills like LB574 and abortion bans will mean that we will lose quality physician candidates to other states and women in rural parts of our state will have to travel even further to access routine obstetrical care. In some parts of the state, women already have to travel two or more hours. Because it can take five or more years to recruit physicians to a practice in areas outside of Lincoln and Omaha, passing legislation like this now will have implications for the physician workforce for decades and ultimately, maternal infant health for at least as long. It is impossible to legislate every single potential medical situation. As physicians, we have trained for years to be prepared to care for patients in many different situations and to be able to adapt and apply skills to new and unique medical problems as we encounter them, so that we can provide both patient-centered and evidence-based care in complex scenarios in obstetrics and gynecology. We could spend days telling you about all the patients we have encountered over the years that have given me the perspective from a professional standpoint that any further abortion bans in Nebraska are not good and that targeting trans youth is dangerous. Please oppose LB574 and amended LB574, and any abortion bans. Respectfully. Grand Island Obstetricians and Gynecologists. Libby Crockett, MD, Kathryn Kenna, MD, Molly Johnson, MD, Erica Haak, MD, and Matthew Brennan, MD. Thank you, Mr. President.

**KELLY:** Thank you, Senator Hunt. Senator Machaela Cavanaugh, you're recognized to speak.

M. CAVANAUGH: Thank you, Mr. President. This letter, with over a thousand doctors signed on, but won't change your minds. I was looking at it and I wondered, I wondered about these people. So I started looking them up in the voter file that I have. And I noticed that one on the first page is my constituent. And so, I, I looked at it a little bit more and he's a Republican. And I thought, I wonder-- well,

he signed on to this letter. So I wonder -- he must have had, you know, there's scores. He must have had like a, a score that made him moderate. No, he didn't. Which meant that -- and I went to very conservative doors in my district. I've never talked to this individual, ever. They had the most conservative scores. And every survey question that they had ever been asked, they answered the most conservative answer, including opposing stem cell research. That is who has signed onto this letter. My constituent, who's a doctor, who opposes stem cell research, who's clearly a conservative Republican, signed on to this letter. But you don't care, and your constituents, too. Your children are posting things on social media. Your children are calling you, colleagues. You have to live with your vote. The Governor doesn't have to live with your vote and Kathleen Kauth doesn't have to live with your vote. You have to live with your vote. You have to live with the role that you play in history in the making today. You have to live with the fact that you vote to take away people's rights. You have to live with that. The rest of us have to live with the implications of all of that, but you have to live with that. If you didn't sleep after Tuesday night, reflect on that. You don't have to vote for this. You don't have to vote for cloture for this. Senator Armendariz works for Methodist. How are you going to continue working with the people who you are trying to criminalize? You don't have to vote for this. You don't. It's that simple. It is truly, truly that simple. You don't even have to stay here. You could check out and go home and see your kids who are begging you to not vote for this. And tell them that you love them and that you heard them and that you did the right thing because you know it's the right thing. You know that it is the right thing. You know that this bill is wrong and you know--

KELLY: One minute.

M. CAVANAUGH: --that under any other circumstance, this never would have happened. And you have the power to stop it. You have the power to stop it. So please stop it. Whatever your reason is, is if, if it's because you think that this is going to destroy the GOP, Senator Riepe, it is going to. You're going to lose Omaha and Lincoln. You absolutely are going to lose Omaha and Lincoln. Beau Ballard, Carolyn Bosn, Linehan's district, Armendariz' district, Kauth's district, you're going to lose it, but not before you destroy these lives. Listen to your own children, please. Please, listen to them.

KELLY: That's your time, Senator.

M. CAVANAUGH: Thank you.

**KELLY:** Thank you, Senator Cavanaugh. Senator Day, you're recognized to speak.

DAY: Thank you, Mr. President. So, what we know about LB574, is we have three very solid reasons for you to not vote for it today. Number one, as some of the attorneys in the body and outside the body have articulated, there will be several legal challenges to this bill. As was said on the floor this morning already, there are lawsuits ready to be filed in the event that this gets signed into law. And do you know who's going to pay for all of that? The people sitting up in the balcony. Taxpayers. Because when the state gets sued, that is on the taxpayers' dime. So in terms of being good stewards of taxpayer dollars, if you're voting for this bill today, you are literally throwing taxpayer money down the drain, because you know the legal challenges are coming. Number two, we have had three separate letters sent to us from the business community, three separate letters urging us not to pass this bill. We have seen bills like this pass in other states and they have literally lost billions of dollars in lost business. Billions. We already have a negative net migration of 2,000 people per year, educated workers over the age of 25 leaving the state. We will lose jobs. We will lose businesses. We will lose people, even worse than we already are. We will lose billions of dollars, on top of the legal challenges that will come from the passage of this bill. Third, every major medical organization in Nebraska and in the United States is opposed to this bill, both pieces of it. The Nebraska Medical Association is opposed to this bill. The American Medical Association is opposed to this bill. The American Academy of Pediatrics is opposed to this bill. The American Psychological Association is opposed to this bill. The American College of Obstetrics and Gynecology is opposed to this bill. Every major medical organization. We've got taxpayer dollars being wasted on legal challenges. We've got the business community telling you we will lose billions if this gets passed. We've got medical organizations of the highest stature urging you not to vote for this because it is dangerous.

**KELLY:** One minute.

DAY: And then today, we had a letter from medical professionals in the state, that gathered 1,200 and counting signatures in 24 hours. Twenty-four hours, they gathered 1,200-plus and counting because more are signing on as we stand here, signatures from medical professionals in Nebraska, asking you to not vote for this bill. Let's-- let us be clear. This bill puts patients' lives at risk and it puts the careers of medical professionals at risk. We refuse to accept either.

KELLY: That's your time, Senator.

DAY: Thank you, Mr. President.

**KELLY:** Thank you, Senator Day. While the Legislature is in session and capable of transacting business, I propose to sign and do hereby sign LB276A with the emergency clause. Senator Raybould, you're recognized to speak.

RAYBOULD: Thank you, Mr. President. I'm taking a pause from reading letters from physicians. And I'm reading a letter from Senator Moser's constituent, constituent in Columbus. But it's, it's directed to Senator, Senator Bosn. And she asked me to read it to the body. Dear Senator Bosn, I'm writing today to urge a non-vote or a vote against the bill that restricts abortion even further and that takes away the rights of trans young folks and their parents, as well as women's reproductive rights. A people's government should not be limiting parents' rights and women's rights to do what is best for their family. I don't know if you remember me, but I just talked to your mom in church a couple of months ago. I was your high school math teacher. And while I had you as a student, I lost a baby. Your mom said when you were in my classroom that you, too, were impacted by my grief. Your mom indicated that this had a huge impact on you while you were my student. What you don't know is that my husband and I had struggled for four years to get pregnant with our first child and I was considered a geriatric mother, as I was over 35. The biological time clock was ticking, so to speak. We wanted so badly to have a second child so our first would have a sibling. We, unfortunately, had to have an amino [SIC] done at 17 weeks, just as we had with our first daughter. We were devastated that our second pregnancy was at risk. Our daughter would most likely be born dead and she had many, many health issues: heart was not functioning properly, she had Down's syndrome, brain was not developing properly, etcetera. We had to make a decision: carry it to term or wait until I naturally aborted or end the pregnancy. We consulted with doctors, chaplain, family, etcetera. We prayed for a direction from God. This child was very much wanted, very much loved and we had dreams for a wonderful life for her. I had suffered from a pretty tough case of postpartum depression after our first child, so my mental state was also a factor. At 17 weeks, we made the difficult decision to end the pregnancy. I was given a pill to cause me to go into premature labor. And I delivered Sarah Elizabeth [PHONETIC], dead, at 17 weeks. We were crushed and we've had long-term grief over that difficult decision and loss. God is good and blessed us with a healthy child after that loss. There are many women whom you do not know that are just like me, struggling with these

difficult decisions. These decisions should not be limited by the Nebraska Legislature, but rather, should be left for the woman, her spouse, her physician, her clergy, and her God to decide. You cannot walk in these folks' shoes, nor should you limit their right to make these difficult decisions. The same is true for troubled teens who are trying to figure out who they are and where they fit in the world. These decisions are extremely difficult without restrictions from the Nebraska Legislature. Leave these decisions to the family, the child and their doctor to decide. This is no different from a child going through a mental health crisis. Families struggle when a young person is in crisis and our Legislature should not be limiting their medical options. Thank you for reading this letter. It is not one I wanted to share, but at this time, I am so worried about the vote today, today, that I felt I must share this. And this letter is from Senator Moser's constituent in Columbus. Thank you, Mr. President.

**KELLY:** Thank you, Senator Raybould. Senator Machaela Cavanaugh, you're recognized to speak.

M. CAVANAUGH: Thank you, Mr. President. Just listening to the chanting out in the Rotunda. And it's nice to hear. This is what democracy looks like. It is, it is what democracy looks like. The new version of LB574 on Final is not what democracy looks like, it's what corruption looks like. It is what the epitome of corruption in politics look like. And 33 people are going to vote for this because -- honestly, I don't know why they're going to vote for it. I, I-- because they're weak. They're going to hurt your kids because they're weak. That's what it comes down to. They can't stand up to a different branch of government. They can't stand up to the Governor, who did not elect them, who did not send them here. But they can't stand up to that Governor. I don't know. I guess the pen of the veto of something that they want -- something that they want is more important than your children. And all of this disingenuous talk about babies, that's all it is. It's lies. It's just lies. They don't care about babies. They don't care about your babies. They care about getting something. And believe me, they're getting something, because there are people that are voting for this bill that absolutely don't agree with it and they're voting for it, because they're getting something. It's so corrupt. But it is what it is. And it, it doesn't just come at a cost here in the Chamber, as I've said numerous times. This is going to come at a personal cost to many people who vote for this. I'm certain, certain that your kids that have been pleading with you are not going to be happy when you show them how much you don't care about the LGBTQ community, how you are playing a part in feeding into a movement of transphobia. Your kids, your kids that you've talked about, that are

begging you, you're showing them and you're showing your grandkids. And many of you might actually have a grandchild who is LGBTQ, who's trans and, and they don't know it yet or they haven't shared it with you yet. But what you are doing is telling them--

KELLY: One minute.

M. CAVANAUGH: --that they aren't worthy of you, when the reality is, is that you are not worthy of them. Nothing I say matters in this Chamber. Nothing I say matters in this Chamber. So I'm just going to say the unvarnished truth, that this place is morally bankrupt, that you are playing political games with the lives of children and parents in this state, to get something. It's gross. It's vile. Be the person you were sent here to be, not the Governor's patsy. Stand up for people. Don't sit down and be complacent.

**KELLY:** That's your time, Senator. Thank you, Senator Cavanaugh. Senator Day, you're recognized to speak.

DAY: Thank you, Mr. President. OK. So, as I mentioned last time, people kind of come in and come out, so I'm going to keep repeating what we know so far, about LB574. Number one, legal experts have illuminated the legal challenges to this bill. That already exists. There are lawsuits waiting to be filed in the event that this bill passes and gets signed into law by the Governor. Legal challenges are waiting. It will likely cost Nebraska taxpayers millions of dollars in legal fees because there are people already ready to sue the state. And we know. We have heard the basis for those legal arguments. And they are sound. Voting green on LB574 means you are willing to put Nebraska taxpayers on the hook for millions of dollars in legal fees that are already ready to go. Number two, we've had three separate letters from the business community urging us not to pass this bill. Three separate letters: two from local business communities, one on a larger, more national scale, but included large corporations, 300-plus large corporations, that signed the letter urging us not to pass this bill, including Union Pacific, who is headquartered here in Nebraska and other businesses that have large, multimillion dollar locations here in this state, that have created thousands of jobs for your constituents. Amazon, Cargill, PayPal, Google, all signed the letter asking us not to pass this bill. Other states that have passed bills like LB574 have lost billions, with a B, billions of dollars in lost business. We know this because it's been calculated. We know this. We've seen it happen. Reports have come out. Billions of dollars, dollars. North Carolina lost \$3.76 billion in business because of their anti-trans bill. Billions. I do not want to hear you talking

about being pro-business if you push green on LB574 today. You are literally saying you are OK--

**KELLY:** One minute.

DAY: --with this, with this state losing billions of dollars, losing educated workforce, which is already a problem here. It's simply only going to get worse. This is fact. Number three, every major medical organization has stated their opposition to both provisions in this bill. The Nebraska Medical Association, the American Medical Association, the American Academy of Pediatrics, the American Psychological Association, the American College of Obstetrics and Gynecology, all have stated their opposition to this bill. All of them. And today, we were all given a letter with 1,200-plus signatures that were gathered in the last 24 hours from physicians in Nebraska.

KELLY: That's your time, Senator.

DAY: Thank you, Mr. President.

**KELLY:** Thank you, Senator Day. Senator Raybould, you're recognized to speak.

RAYBOULD: Thank you, Mr. President. This is from another physician that I have kept in touch with over the, the whole course of, of this debate on LB574 and LB626. Dr. Delaney says, I've, I've spent the last couple of weeks trying to process what I heard from all of you during the debate. Many of you who oppose pro-choice position shared truly important stories with regard to your personal stance about abortion. I want you to know, I believe these stories are an important part of this narrative. I recognize that many of you have positions regarding abortion that are deeply rooted in your humanity and in your religious beliefs. As a physician who has been working in women's health for almost 14 years, I have heard and have experienced stories just like yours and have always respected them. I have helped patients keep a pregnancy through difficult fetal anomalies, anomalies in which the fetus did not perish on delivery. I have helped patients keep a pregnancy and, and plan an adoption. And these pregnancies have remained a large part of me as a human and a physician. I respect your world view and want you to know I work hard to meet my patients' goals, whether or not they wish to proceed with termination or with maintaining a pregnancy. I am disheartened that we are in a position where physicians who support choice are looked at as unethical. I am incredibly frustrated that despite the years of training and hours we work post-training, you believe we are fearmongering. I am angry you

are disappointed in us when none of you have reached out to any of us or taken up on our offer to shadow us as we navigate the complexities and nuances of pregnancy care. What may seem black and white to you never is. One of the scariest things about the practice of medicine is lack of anticipation. To be a good doctor, you must have a plan and you must think through the consequences of your actions or lack of actions with regard to treatment. It is from this mindset, as well as knowledge from many of my friends and colleagues in states with bills similar to yours, that we all must be prepared and anticipate the changes that occur when politics enters the physician's office. To start with, we will first lose physicians in this state. When you start threatening physicians' licenses with disciplinary action for providing standard of care medicine, they will absolutely choose other places to work. In the northern part of Idaho, there are literally two OB-GYN physicians left, both of whom are planning to relocate to Washington State in the next six months. Ultimately, the women of that great state will have to travel over 3 hours for obstetric care. If doctors don't actually vacate the state, physicians who normally provide obstetric care will stop providing it. For example, in the western part of Nebraska, many great family practice physicians deliver babies. Many of them have reached out to me and disclosed that if this passes, they will just pursue a traditional family practice without obstetrics. Currently, 66.3 percent of Nebraska is considered a maternal care desert, where women have to drive over an hour to receive adequate care. This bill will absolutely worsen the situation because physicians will not want to fear losing their license. And while I appreciate the exceptions in some of the language of this bill, the maternal life exception is incredibly difficult to interpret. The terms reasonable medical judgment are used, but I quarantee, in a state as hostile to physicians as Nebraska is right now, an attorney could twist that same language to indicate the patient was not in harm's way enough to end a pregnancy. For example, previable, premature rupture of the membranes is a condition we see quite frequently. Is it a cond-- it is a condition in which the amniotic sac breaks open too early, for example, at 14-16 weeks.

**KELLY:** One minute.

RAYBOULD: Thank you. At the exact moment the water breaks, a mother's life is not at risk, but standard of care is to offer induction of labor, a type of abortion where the fetus will die outside of the uterus. This is offered because letting the pregnancy continue in this setting can set the patient up for infection, uterine scarring and subsequent infertility. This is exactly one of the lawsuits pending against the state of Texas. The patient in question was denied

induction of labor because a fetal heartbeat remained. Ultimately, she eventually presented septic and spent 10 days in the ICU fighting for her life. She has subsequently developed severe uterine factor infertility directly related to her experience. I need you all to seriously consider, consider what you are doing. I need you all to understand the ramifications of what you are doing for every single woman and girl in this state. I need you to understand that what may seem black and white is absolutely not. I need you to walk in some of my patients' shoes.

**KELLY:** That's your time.

RAYBOULD: I need to love one another without judgment. Thank you, Mr. President.

**KELLY:** Thank you, Senator Raybould. Senator Conrad, you're recognized to speak.

CONRAD: Thank you, Mr. President. Good afternoon, colleagues. I continue to rise in support of LB565 and in opposition to the recommit to committee motion before us. Considering that we have very limited time on a significant measure before us, LB574, that will be on our agenda in about 15 minutes, I wanted to also talk about how important it is to ensure that you can honor your deeply held beliefs and represent your constituents in your state as you see fit, but ensure in line with our pattern and practice that we legislate thoughtfully and allow for thoughtful implementation of our laws, particularly when they impact sensitive areas and make dramatic changes. So remember, LB574 has an emergency clause on it. So under our law, after it is signed by the Governor, it will take effect the next day. So assuming that it is adopted today and signed by the Governor today, that will take effect tomorrow. That will take effect tomorrow. This has not been done with abortion laws and abortion restrictions over the modern history of Nebraska. I talked about what happened with the 20-week ban with Senator Flood. I talked about what happened with the abortion method ban with Senator Geist. Neither of those measures had an emergency clause. They allowed for thoughtful implementation to make sure that stakeholders could adopt rules and regulations, were aware of the changes, and the same should hold true for the adoption of LB574. So I want to also inject into the record the fact that in LB209 in 2019, Senator Albrecht brought forward a measure in regards to "informed consent" and bias counseling to let patients know about abortion reversal. That was approved on June 4, 2019. It did not have an e clause. The measure to change informed consent did not have an e clause. LB690, in 2011, brought forward by Senator Brasch that made

changes to judicial bypass and parental notification, passed May 26, 2011. It did not have an e clause. It allowed time for thoughtful implementation. LB521, brought forward by my friend, then-Senator Fulton, now our-- formerly our tax commissioner, as well. Senator Fulton brought forward LB521, a ban on telemedicine access to abortion care. It did not have an e clause. It did not have an e clause. My friend, Senator Cap Dierks -- wow. I am looking at Myron. I know you remember Cap. It was great to serve with Senator Cap Dierks. And we had a very different point of view when it came to abortion, but we found a way to love each other through it and to work together on a lot of other issues that impacted working families and family farmers. And I'm really grateful I had the chance to serve with him and work with him and learn from him. Senator Dierks brought forward a change to [INAUDIBLE], to informed consent in counseling, called the Women's Health Protection Act in 2009, LB594. It passed in 2010, and it did not have an e clause. Abortion restrictions in our modern history and major changes to medical practice put forward, as stated, to be the public policy of the state of Nebraska--

**KELLY:** One minute.

CONRAD: --does not contain an e clause. Thank you, Mr. President. LB574 does, colleagues. And what's more harmful than the fact that it has an e clause and all these other abortion restrictions haven't had e clauses, you adopted the abortion restrictions three days ago. You adopted the abortion restrictions for the first time three days ago and it could become law tomorrow. The law itself is not grounded in medical terminology. It is utilizing political rhetoric. So as doctors and hospitals and medical practices need to convene administrative teams and legal teams to figure out what that jargon means, you could unnecessarily ensnare a healthcare professional who was trying to follow the law, whether that's through civil penalties, the uncertainty of criminal penalties or their license.

**KELLY:** That's your time, Senator.

CONRAD: Thank you, Mr. President.

**KELLY:** Thank you, Senator Conrad. Senator Blood, you're recognized to speak.

**BLOOD:** Thank you, Mr. President. Fellow senators, friends all, I stand opposed to the recommit to committee, in support of the dispense with the reading and in full support of the underlying bill. And I'm glad that Senator Conrad brought up the language in the bill, because

that's what I want to talk about a little bit. And this is one of the things when we talk about unintended consequences that happened. We've discovered that in the last bill, where all of a sudden, they realized that they had eliminated the ability for people to get IVF and panicked. Now, we are rushing through a second bill and I want to point out some language. And again, Senator Conrad unknowingly set me up for this. So the word preborn is used throughout the bill. And the word preborn is not a medical term. Get on the phones, call your doctors. They're going to tell you the same thing. Now, in the first part of the bill, you've excluded in-vitro and the termination of the embryos are not -- that are not carried inside a woman's body. And so, you feel that by doing that in the bill, you've eliminated the risk to people that utilize IVF. Now, I know that in Catholicism, especially in our state, that they are already against IVF, but it sounds like they're willing to look the other way to get the rest of the bill passed. But listen. Later in the bill, you define, you define pre-born child as a Homo sapien throughout the embryonic and fetal stages of development. So when you fertilize an embryo in a petri dish, what happens? That is the beginning at the embryonic stage. So you have literally said, hey, if you're going to have IVF, we're gonna look the other way. And then later in the bill, you pre-- you say, oh, but if it's in the process, the embryonic process, we're not going to allow that. Again, you rushed through the bill, you mess up the language. You've created, yet again, an issue that people are going to take concern with. So either you did it knowingly or unknowingly, but you've taken away a woman's right to conceive through IVF, these precious babies that you say that you want to support, because not every woman has the ability, unfortunately, to conceive through intercourse. But that's on you. So a fetus is not an unborn or a preborn baby or child. In fact, the terminology unborn, according to the medical community, starts at 11 weeks. And so you have the goal to legislate this medical care. And then, you use prop-- improper medical terminology, which gets to the point again that we are not doctors. And now by putting an e clause on this, you don't get to fix it unless of course you try and amend it on today's reading and take it back to Select, but you will never do that. And just like the anti trans part of the bill, you haven't asked us for our opinion nor been willing to change anything. And whether you like it or not, as I discussed earlier, courts have consistently recognized for decades that parents have the fundamental right to raise their children and that includes the right for parents to make healthcare decisions for their children. And this is one reason these types of laws continue to get struck down, like what happened in Arkansas. You put out the false narrative that children were lining up like it was some kind of candy store,

when this bill that we're going to pass today is maybe going to affect 4 to 5 kids a year, maybe, who've gone through a very extensive process that takes years. Because, again, the average age for this type of surgery is 29.5 years. You heard one of our senators talk about how a, a--

KELLY: That's your time-- oh, excuse me. One minute. One minute

BLOOD: No. I can get one minute. Thank you, sir. It's very expensive surgery. So what's the constitution between friends any old way, right? The constitution authorizes only limited government, which you never seem worried about until you have a bill that you're trying to say we need to stop government overreach, until you want government overreach. So how is it OK that a nation conceived in and dedicated to individual liberty now feels it must be involved in our healthcare? And when they're involved, they can't even get the language right so it's medically accurate. Good on you. Enjoy your time in the courts. You guys all know better. I don't care what the topic is. If you can't write the bill correctly, it should never get to the floor. Thank you, Mr. President.

**KELLY:** Thank you, Senator Blood. Senator Machaela Cavanaugh, you're recognized to speak. And this is your third time on the motion.

M. CAVANAUGH: Thank you, Mr. President. Sorry. Well, I think we're moving on to the next bill in 8 minutes. So I, I wanted to do a better-- wanted to document the opposition to LB574, because we've had medical professionals, we've had businesses, we've had faith leaders, signing letters. We've had people come and testify. We've had people send emails, we've had phone calls, showing up in the Rotunda, showing up in the balcony, and I wanted to have a more formal record. So I did put on my Twitter, a Google form, for anyone who is interested in making their name a part of a record of opposition to LB574. And I ask that people and it will remain private, that they put their addresses in, because I will be verifying before I share it with my colleagues, that they are Nebraskans and real people. But it has been less than 2 hours and 300 people have signed on. So I know it doesn't matter, but this is historic. I very much doubt but I always stand for correction, that there has been a time in the Nebraska legislative history where so many people have opposed something where this deliberative body didn't listen to them and just did it anyway. But we are no longer a deliberative body. We are here to be bought off by the Governor because he wants this win. And we don't care if it's going to harm people, because we're getting something for it. But I look forward to 2025 when I no longer have to serve with so many of you. And I'm not

talking about the term-limited senators. I look forward to not serving with the senators that are up for reelection in 2025 or 2024, but in 2025 session, that you won't be here anymore, that you can't harm people anymore, because you allowed yourselves to be bought by the Governor. But the people, the people will remember today. And they will remember that you did not act with kindness. You did not act with compassion. You did not take into consideration your role and responsibility to them. You allowed yourself to be bought by the Governor, for just a win.

**KELLY:** One minute.

M. CAVANAUGH: Just a win. Can't have a loss. Got to have only wins. The Governor, you're giving him that win, but you're going to get a loss. And I look forward to that day. Until then, colleagues, I'll be filibustering, till the end of the One Hundred Eighth Legislature, 2024, I'll be filibustering. Until you get that loss, I'll be filibustering. And to the people watching, to the trans kids, you are loved. You matter. You're worth fighting for. And I'm not going to stop fighting for you.

**KELLY:** That's your time, Senator. Thank you, Senator Cavanaugh. Speaker Arch, you're recognized for a message.

ARCH: Colleagues, per the agenda, we will now move on to the next item on the agenda, LB574.

KELLY: Mr. Clerk.

CLERK: Mr. President, quickly, some items. Amendments to be printed: Senator Machaela Cavanaugh to LB565e and LB565Ae. Additionally, communication, LB276e and LB276Ae were presented to the Governor on May 19, 2023, at 1:30 p.m. Mr. President, next item on the agenda, LB574. Senator Hunt would move to recommit LB574 to committee.

**KELLY:** And prior to that, I'll simply read that the presiding officer has the discretion to empty the galleries in cases of disturbance or disorderly conduct. While I don't anticipate exercising that authority, I'd just like to remind everybody observing the Legislature that there should be no outbursts, including clapping, heckling, or cheering. Senator Cavanaugh, please state your point of order.

M. CAVANAUGH: Thank you, Mr. President. The queue, I know that the pages were swapping out, but the queue was not cleared at the start.

**KELLY:** Senator Cavanaugh, we will reread the bill and as soon as it's read we'll clear the queue. Mr. Clerk, for items.

**CLERK:** Mr. President, next item on the agenda, LB574. There's a priority motion. Senator Hunt would move to recommit the bill to the Health and Human Services Committee.

KELLY: Senator Hunt, you're recognized to open on your motion.

HUNT: I wonder if it's possible to crash that queue system, that software. Thank you, Mr. President. Thank you, Nebraskans. Thank you, thank you, thank you, Nebraskans, for this last 81 days of advocacy, of love, of tears, of this ethic of love and inclusivity that you have brought to the state of Nebraska. Whatever happens today, trans people belong, you are loved. And what these 49 people can do to you has nothing to do with the rest of your life. I was talking to Senator John Cavanaugh before we started this, and I asked him if he wanted my time because I, I honestly feel kind of numb. You know, I, I almost don't have any more to say. Yet, yet, it keeps bubbling up. Yet, the fountain doesn't stop. And as I was talking to John-- to Senator Cavanaugh about perhaps yielding him my time if he wanted to speak instead, I got this email from a trans 16-year-old who goes to Omaha Central High School and I-- this is the perfect opening. This is the perfect thing for me to say, and I hope I do it justice. This is a-an email from his mother. She says, I want to share a poem that was delivered in the preliminary and semifinal rounds by my 16-year-old trans child who is a member of the first place poetry team from Omaha Central. He gave me permission to share, but prefers his name be withheld. His poem is entitled: I need them to treat it like it is. Thank you so much for your blood, sweat, and tears. It matters. Love, a Nebraska mama of an amazing trans kid. I need them to treat it like it is. I am waiting in lines of traffic for someone to walk up beside me, knock on my window so hard it breaks. I am waiting in lines of traffic in my mother's car, in my mother's body for it to finally be my turn to crash. I am waiting with my body on the floor of my shower or on my bed or in the middle of an alley for them to declare my death a suicide. I need them to treat it like it is. I need them to treat it like a murder because to be trans is to wait in traffic hoping it will be a quick death, a merciful end, a sharp collision, fleeting as fluttering wings. To be trans is to be constantly reminded of how they want you to die in your cocoon before you can even begin. When you see me lying slumped right there don't send your useless thoughts and prayers, check yourself, look back on every word, every pronoun left out of your vocabulary every time you stayed quiet in the face of genocide. Because, yeah, it is that deep. Your trans peers notice when

you don't speak. Look into our eyes. Do we make you uncomfortable? Do I make your knees weak? Now look at your hands. This is no suicide. I need you to treat it as it is. Every trans suicide is a murder. That was a poem from a 16-year-old trans boy from Omaha Central High School who's part of the first place poetry team here in Nebraska. To parents of trans kids, I get what you're going through. I can't know what it feels like to be trans, but I know what it feels like when you see the life that you may have imagined for your child from the time you first saw them on the sonogram to when you first held them in your arms, fixed scraped knees, picked out outfits for the first day of school. I know what it feels like to have some expectations and dreams that you had for your child and you realize that it's not going to be that way. But I want to assure you that your child's identity is not a reflection of your parenting. It's simply who they are. It's simply who they are. And if you are blessed to know that your child is trans, you should feel proud as a parent because that means your child knows that they are safe with you. We are in the midst of a time of unprecedented violence for LGBTQ people in our country. We are working to fight for rights that we have already won. And there are kids on the streets, kids doing, you know, survival criminal activity, kids who are forming groups to take care of each other as new chosen families because there are thousands and thousands and thousands of families in this country that are rejecting their LGBTQ kids. So if you have the blessing and honor of knowing your child is queer or trans or anything different from what we thought they would be when we were first holding them in our arms, what we thought they would be when we first dropped them off at kindergarten, what we thought they would be as we shopped for Christmas presents for them when they were ten, if you have the blessing of knowing them as they are, that is a testament to your parenting as the best possible parenting that child can get. Our kids need our love and support now more than ever. Senator Aquilar, your kid needs your love and support. And these feelings when our kids come out can lead to a lot of grief and a lot of complicated feelings, but knowing who our kids are is what life is about. People are different. I also want to take a moment to speak directly to the trans kids in Nebraska. There are a lot of inconsistencies in this bill in terms of how you're going to be able to receive care, you know, what happens if we have a trans kid in Nebraska who is not yet on puberty blockers who's maybe eight or nine or ten? Maybe that kind of medication is not appropriate for them yet according to medical professionals. What happens to those kids as they get older, as they have different medical needs as trans kids? They're not grandfathered in. Even though they've already transitioned socially, even though they're trans, even though they're living as

they are, that's a problem with this amendment. What happens if a 13-year-old boy has been taking puberty blockers and three years from now when he's 16 he wants to start hormone therapy with support of his family and doctor? He won't be able to do that under this bill with the grandfather clause. Senator Kauth and members of this body think that they have found a compromise. They think that they have found a way to make this bill work for people in Nebraska who have already transitioned, but this bill does not. It does not. And if you believe it does, if you are one of the people who had qualms and questions about wanting to come to an amendment that results in something better for the kids of Nebraska because you have compassion for those kids, this amendment isn't it. It doesn't do what you think it's going to do. Let us acknowledge the hypocrisy of the religious far-right conservatives here who seek to pass discriminatory bans on gender-affirming care. These are the same people who claim to be defenders of freedom and liberty. Yet, they seek to deny--

KELLY: One minute.

HUNT: --they seek to deny transgender individuals the ability to live and be free and be themselves as their true selves. That is not freedom. That's not liberty. That's not morality. Denying transgender youth the medical care they need to live a happy and healthy life is not morality and the effect that this is having on the entire LGBTQ community in Nebraska and those who love them is not an expression of morality. There's going to be extensive legal action against the state for this bill if it passes today. Mr. President, I'll withdraw my motion.

KELLY: The motion is withdrawn. Mr. Clerk.

**CLERK:** Mr. President, Senator John Cavanaugh would move to return the bill to Select File for a specific amendment, that being AM1474.

**KELLY:** Senator John Cavanaugh, you're recognized to open on your motion.

J. CAVANAUGH: Thank you, Mr. President. To be clear, I get ten
minutes?

KELLY: Yes.

**J. CAVANAUGH:** Thank you, Mr. President. Colleagues, I rise in opposition to LB574 in this form and any other form. I have my amendment on the board and I have no illusions about the fact that I don't think any of you will vote for it. So I did want to take my time

to clarify some of the things, my, my questions and concerns about the LB574 as it is currently amended, so I'd ask if Senator Hansen would yield to some questions.

KELLY: Senator Hansen, would you yield to a question?

HANSEN: Yes.

**J. CAVANAUGH:** Thank you, Senator Hansen. So the bill as it's written now is basically an amendment that you proposed. Is that right?

HANSEN: Yes.

**J. CAVANAUGH:** I just want to make sure I've got the right person on the mike.

HANSEN: Yep.

J. CAVANAUGH: So I'm just going to-- I've got a couple of questions that I want to clarify that from people that I've heard are confused about. So in this bill the ban on a gender-affirming care would go into effect on October 1 of 2023. Does that sound right?

HANSEN: That is the operative date. Yes.

**J. CAVANAUGH:** OK. And then after that effective date, for anybody-trans person under 19 won't be able to get care except for as permitted by the chief medical officer?

HANSEN: Yeah, whatever rules they promulgate.

**J. CAVANAUGH:** OK. And so, so the chief medical officer has to set up those rules to allow for the care, as you just said. So after October 1, 2023, if no person who's previously— who has not been previously had care will be able to get care unless it's in compliance with those rules from the chief medical officer. Does that sound right?

HANSEN: From my understanding, yes.

**J. CAVANAUGH:** OK. And then if somebody is currently receiving, say, gender— or I'm sorry, puberty blockers, they will be able to continue after October 1.

HANSEN: From my understanding, yes.

**J. CAVANAUGH:** OK. And so if they were to-- would they be able to then move on to hormone treatment after October 1 or will they be banned from continuing in, in their course of care?

**HANSEN:** That I can't completely answer, but I can get back to you on that if I need to.

**J. CAVANAUGH:** OK. Thank you. So if the chief medical officer hasn't promulgated those rules by October 1, will there be a path for anyone to start care after October 1?

**HANSEN:** Again, that's another one I can't quite answer without being-without-- I want to make sure I'm 100 percent accurate if I'm going to answer some of these questions. That one I can't answer right off the top of my head.

J. CAVANAUGH: OK.

HANSEN: I'll do my best when-- if I do find out, I'll do my best [INAUDIBLE] on the microphone to kind of clarify that.

J. CAVANAUGH: I appreciate that. And obviously, everybody, we have to talk a little loud here because there's a lot of folks in the Rotunda. So once the chief medical officer promulgates those rules, how long will they be in effect before they can come back and change them again?

**HANSEN:** That I'm unsure. That might be something that they determine, the chief medical officer and DHHS per their rules and regulations that they set forth.

**J. CAVANAUGH:** OK. And does the bill tell the chief medical officer what criteria they have to consider when setting these rules?

**HANSEN:** Yes, there are-- we do have some-- I have to find it here in the bill, but there are some contingencies I think we want to see them address when they do-- when they promulgate the rules and regulations.

**J. CAVANAUGH:** So when you say-- the bill sets out minimum standards that they have to, they'd have to set. Right?

HANSEN: From my understanding, yes.

J. CAVANAUGH: OK. But I haven't seen anywhere in the bill, and, and if you could point to it, where it tells them what criteria they're

supposed to consider as they set those minimum standards. Are you aware of a place in the bill where it says that?

HANSEN: I'm looking at it right now.

**J. CAVANAUGH:** OK. And maybe we, we can visit off the mike about that as well. And, you know, we might have an opportunity, but I just want to get some of these questions at least out there so people know--

HANSEN: Yep.

J. CAVANAUGH: --what people have been concerned about. So you did mention DHHS and so looking at it, it says DHHS will develop rules and it says that they cannot be inconsistent with the chief medical officer's rules. Is that right?

HANSEN: Yes. From my understanding, yes.

**J. CAVANAUGH:** So does this mean that whatever the chief medical officer develops for rules cannot be undone by DHHS?

HANSEN: That I'm unsure of.

**J. CAVANAUGH:** OK. And so the chief medical officer has to approve the, the rules. Does that mean-- so he'll make the decision, is that-- I guess he makes the final decision. Is that the right way to read it?

HANSEN: Can you repeat that again?

J. CAVANAUGH: Yeah, sorry, it is loud in here. So-- sorry, where was I here? OK, so the bill says-- I misread it, so it's not your fault. So the bill says that-- refers to drugs that are approved. You, you recall that part? It's on page 15, line 25.

HANSEN: Yeah, OK, I was on the wrong page.

J. CAVANAUGH: OK.

**HANSEN:** Yeah, the administration, prescribing, delivery, sale, or use of puberty-blocking, cross-sex hormones. Yes.

**J. CAVANAUGH:** So it says that they, that they can make rules that allow for drugs that are approved. Is the chief medical officer the one who would approve those drugs?

**HANSEN:** I would assume that based on the information he gets from the medical community and best practices in DHHS. But I can't say with 100 percent certainty, that's just what I'm assuming.

**J. CAVANAUGH:** OK. But in the bill, as it reads, it doesn't say who makes that decision or who approves the drugs.

HANSEN: I don't think explicitly, on that section right there.

**J. CAVANAUGH:** So. All right. If the, if the chief medical officer is going to make changes to the rules, do you know, do they have to give any notice or is he just allowed flexibility in cases of emergencies to make changes to the practice?

HANSEN: I'm uncertain.

**J. CAVANAUGH:** OK. So it looks like the authority is delegated to the chief medical officer is ongoing so he can make changes as required based off of, like, what's going on in the practice at the time. Does that sound right?

**HANSEN:** Again, it probably depends on how they promulgate the rules and regulations and what they set forth.

**J. CAVANAUGH:** OK. And so, get back to the minimum standard. So it says that the, the chief medical officer is supposed to set minimum standards, certain requirements and standards. Is that right-- I quess?

HANSEN: Yeah. So the minimum-- which include, yeah, the following and those are some of the criteria that, that you were discussing earlier.

**J. CAVANAUGH:** So are those minimum standards, is that like just a place to start and then he can go from there and see what fits?

HANSEN: I would assume so, yes.

**J. CAVANAUGH:** OK. And then so the, the chief medical officer is authorized to adjust the minimum standards as they, as they see fit. Does that sound right?

**HANSEN:** It depends on, again, how they-- how, you know, how they promulgate the rules and regulations in what they set forth.

**J. CAVANAUGH:** OK. And so then there's a part on that—— I think it's on the same page or maybe a little bit further down about the waiting period so that they—— one of the rules——

HANSEN: Yes.

**J. CAVANAUGH:** OK, see that part. So-- and again, that would be determined by the chief medical officer?

**HANSEN:** Are you talking about the patient medical record documentation requirements?

**J. CAVANAUGH:** It's a little bit-- it's the next one or two down from that, that they give informed consent and then they have a waiting period before they can start care.

HANSEN: What, what line is that on?

J. CAVANAUGH: Sorry. It would be on page 16, line 11.

HANSEN: OK. I thought it was on page 15.

J. CAVANAUGH: Sorry.

HANSEN: Line 11, you said?

**J. CAVANAUGH:** Yeah: A minimum wait period between the time the health care practitioner obtains informed consent and the administration of prescription.

HANSEN: You said page 16, line 11?

J. CAVANAUGH: Yep. Oh, are you on-- sorry, you're on the original amendment, not the-- I, I got you. Page 15, line 18, I'm told.

HANSEN: There we go.

**J. CAVANAUGH:** Yeah, so E&R changes the lineage-- lining on once it gets re-enrolled. Sorry.

**HANSEN:** "A minimum waiting period between the time the health care practitioner obtains informed patient consent and the administration, prescribing, or delivery of puberty-blocking drugs, cross-sex hormones, or both to such patient."

**J. CAVANAUGH:** So-- and my question about the waiting period is, it's the chief medical officer gets to set what that waiting period is?

HANSEN: A minimum waiting period it looks like, yes.

**J. CAVANAUGH:** So my question is, what is the order of magnitude of that waiting period? Is it a week, a day, a month, a year?

**HANSEN:** It would probably be up to the chief medical officer and then what they determine is best practices and medical advice.

J. CAVANAUGH: OK.

HANSEN: I'm assuming, again.

**J. CAVANAUGH:** And then I, I really do appreciate your helping with these-- clarifying with these questions.

HANSEN: I'm doing the best I can, sir.

J. CAVANAUGH: I-- no, I appreciate it. I, I told you I was going to ask you some questions. I didn't give you all of them. So the last one I have is long lasting-- there's a-- on-- well, on mine it was page 15, but I think is probably page 14 before that. But there's terms like long lasting and intense for determining what's appropriate. Do you know if those would be-- again, is it up to the definition of the chief medical officer how to define what is long lasting and what is intense?

KELLY: One minute.

HANSEN: I would-- yes, I would-- again, I can only assume what they're going to do based on medical advice, best practices, and also the types of prescribing-- are you talking about the medications that are the, the hormones and when--

**J. CAVANAUGH:** Well, in that particular section it applies to whether—what criteria they would consider, I think.

**HANSEN:** OK. Yeah, I'm assuming that would be up to the chief medical officer and then his-- how they promulgate the rules.

J. CAVANAUGH: Well, I appreciate your-- those are all of my questions at the time. If I get another chance, I might ask some more but I appreciate it, Senator Hansen. So, colleagues, I-- obviously, I'm going to run out of time here. I hope to get a chance to talk some more, but I think there are a lot of unanswered questions about this bill. There's some ambiguity. There's some things that are unclear that just require a little bit more discussion about this bill. And

we're here on Final Reading. This is really the first time we're discussing this bill at the moment as it's currently written. And we didn't get these questions, you know, in front of a committee. We didn't get a hearing, and we're rushing to implement this bill.

KELLY: That's your time, Senator.

J. CAVANAUGH: Thank you, Mr. President.

**KELLY:** Thank you, Senator Cavanaugh. Senator Briese, you're recognized to speak.

BRIESE: Thank you, Mr. President. And good afternoon, colleagues. I rise in support of LB574. And you can portray this bill any way you want but for me, this bill is simply about protecting innocent life and protecting our kids, period. And this represents a reasonable place to land in that effort. And a lot of us would like, like something more than what we ended up with here. But this, LB574, the Final Reading version, represents compromise. With it, we've accommodated concerns relative to rape, incest, medical emergencies. With it, we've protected our kids from irreversible and potentially dangerous surgical procedures while still ensuring some standards for other gender-affirming medical services. It represents a balance of competing interests, and that's what we do on this body all the time. We balance competing interests and this is where we have arrived in that endeavor here. And relative to the original provisions of LB574, the Final Reading version reflects many of the concerns expressed in those meetings that many of us were involved in regarding LB574: the need to protect youth from harmful, irreversible procedures, but while at the same time preserving the ability to access some of these medical procedures under limited circumstances. Now you can spin this however you want, you can frame it any way you want, you can describe it any way you want. I've heard words like hateful and anti trans, homophobic, things like that, and that's baloney. At the end of the day, LB574 is about protecting innocent life and protecting kids. Nothing more, nothing less. And I would urge your support of LB574. And with that, I would like to yield the balance of my time to Senator Kauth if she would like it. Thank you.

KELLY: Thank you, Senator Briese. Senator Kauth, that's 2:45.

**KAUTH:** Thank you, Mr. President. I'd like to address a lot of the, the extreme things that have been said over the course of the last four months. And Senator Briese spoke to this briefly. The word "hate" has never come from this side of the discussion. We certainly don't hate

anyone. The reason we brought this bill is because we love kids. We want to see them grow up and be happy, healthy adults no matter how they choose to live their adult life. We've had a lot of hateful things said. Labeling this bill as creating genocide, that's shameful. Genocide is the entire destruction of an entire class of people, killing them all. This isn't about killing anyone. This is about protecting kids until they are able to make a decision with more information. I challenge any of you to think back to when you were a teen or younger. Do you still do, say, believe or feel any of the same things that you felt then? Senator Hunt made the comment during some of our many months of them discussing this bill that teenagers change their mind from one moment to the next. That is exactly correct. They do. We owe it to them to be the adults in the room and say, yes, you feel bad, there's something wrong. You don't feel right. Let's figure out what's going on. Let's not give you drugs. Let's not give you irreversible experimental medications and surgeries to try to fix something physical first.

KELLY: One minute.

KAUTH: The adults in the room are trying very hard to come up with legislation that will provide guidelines for kids who are dealing with gender dysphoria. It does not mean by any stretch of the imagination that we hate them. Quite on the contrary, it means that we love them and we want them to be well taken care of. We've had four months of discussion and I've gotten a lot of questions about why aren't the Republicans, why aren't people who support this bill pushing back? We made a very strong commitment to talk about the bill on the board rather than trying to take up all the time on this bill. These discussions have been being had off the mike and not wasting time. We have worked with each other and with members of the opposition to craft language that we feel is appropriate.

KELLY: That's your time, Senator.

KAUTH: Thank you.

**KELLY:** Senator-- thank you, Senator Kauth. Senator Lowe, you're recognized to speak.

LOWE: Thank you, Lieutenant Governor. Eighty-one days, 81 days is what we've spent talking on this bill. It's time it's come to an end. Hate has not come from our side. Fear has not come from our side. The noise does not come from our side. Our side is silent, as most of us have been for 81 days, because we feel it in our heart. We know it in our

head, and we know that this bill is the right bill. It's a compromise. Many of us feel that the six-week heartbeat bill was the answer. We are giving up six weeks as a compromise. We are giving up those little children that will never breathe air. And I'm sorry, I'm sorry for those children. We put up with name calling and the fear tactics and that other senators would yell at us that they will never speak to us again. And what do we do? We, we just say OK. So I am for LB574 that Senator Kauth brought because it is a good bill and because we are for children. We're not out to mutilate children. We're not out to harm their bodies with chemicals. We're not out to kill children. So please support LB574. And with that, I yield the rest of my time to Senator Linehan.

KELLY: Thank you, Senator Lowe. Senator Linehan, you have 2:50.

LINEHAN: Thank you, Mr. President. I didn't get on the microphone this morning, but I'm going to read from -- I guess I'd call it an advertisement. It's from the web, it's from CARE, which is an abortion clinic, Omaha, Nebraska. CARE is the preferred abortion clinic near Omaha, Nebraska. Every member of our team has pledged to make your experience with us one we would want for ourselves, friends, and family members. Our abortion clinic near Omaha, Nebraska, provides and specializes in second and third trimester abortion care. We are one of the nation's only abortion care-- that provide abortion care throughout the pregnancy, meaning first, second, third trimester abortion care. We actively recognize the need for care we provide, and we are proud to serve our patients with comprehensive abortion care. To learn more, I won't read the number. And then it goes down and says, you know, CARE can get you in for an appointment within a week. Our usual wait for an appointment is less than three days. So I'm sure you're all asking, but I can't do that in Nebraska because we have a 20-week ban, but they have a sister clinic in Maryland and in Maryland -- Bethesda, Maryland, you can. Third trimester abortions. I think there should be an E clause on this bill. And I don't think--

KELLY: One minute.

LINEHAN: --any of those doctors that signed the letters that said they didn't support this bill know that this is going on, knowing that all's you have to do is Google abortion care and it pops up with Planned Parenthood. It, it, it's outrageous, folks, and it's near Omaha, Nebraska. And we're acting like women can't get reproductive care in Nebraska or this is about mothers' lives. No, this is about being one of the places in the nation where you can get referrals for

third trimester babies that, were they weren't aborted, could live. Thank you, Mr. President.

**KELLY:** Thank you, Senator Linehan. Senator Jacobson, you're recognized to speak.

JACOBSON: Thank you, Mr. President. And I'll speak up so everyone can hear me and not be bothered by what's going on out in the Rotunda. I want to thank Senator Linehan for her comments because they're spot on. It's horrifying what goes on in this country. Horrifying. We all want to mislead each other on what's really in this bill. But let's talk about what's really in this bill instead of all the garbage you've heard from the time this bill was introduced. This bill is about protecting children, unborn children. And, yes, Senator Blood, they're unborn children, preborn children, and those who are under the age of 19 who are interested in going through hormone treatments and puberty blockers without proper direction. The bill does not ban puberty blockers and hormone treatments. It simply puts it under the jurisdiction of HHS, HHS and the state medical director to determine what the right protocol should be. What it does ban is the removal of breasts of young women under the age of 19. People say, well, should we stop breast augmentations as well? I'd be fine with that. They're minors. And yes, people say, well, you can't compare it to underage drinking. Why can't you? If a parent is buying alcohol for their underage child, they could be arrested for procuring alcohol for a minor. There are laws out there that protect underage children. That's what we're doing here. We're not the bad guys. We're trying to protect young children and young adults that before the age of 19, and we're trying to protect preborn children from being brutally murdered in the womb. That's what we're trying to do. I could spend time on the mike today talking about our journey with reproduction. I could talk about adoption but you've all heard that and I'm tired of taking my wife and my daughter through that journey publicly. I want to publicly apologize for the things that were said about Ray Aguilar by two members of this body, one in particular, who has spewed hate every time she got up to speak on the mike. Shame on her. And she knows who she is. Ray Aguilar is a fine human being who's, who's got the longest standing current tenure in this legislative body and someone I truly admire. Well, let's talk a little bit about some of the other facts. We've heard a lot about everybody's leaving Nebraska, but that's kind of interesting because I'm looking at a report from 2023 best state rankings by U.S. News for young people to live in. Guess who's number five out of 50? Nebraska. First is Utah; second, New Hampshire; third, Idaho; fourth, Connecticut; number five, Nebraska. Now I'm not going to waste reams of paper to send it out to everybody, if you want to

look at it here it is. Let's talk a little bit about California. Boy, there's a great place to live, isn't it? I've been watching over the last two years the number of people that have moved to North Platte and some of the, the transfers of property that have occurred in North Platte. Guess where they're coming from? Front range of Colorado and California.

KELLY: One minute.

JACOBSON: Almost to a person, the people coming from California, what are they saying? We want to get away from the crazy politics, the super high taxes and the cost. People from the front range of Colorado, buy an equal quality home in North Platte for the equity in our home in the front range and cut our cost of living in half or more. Nebraska has tremendous reasons to be here. We have abundant clean water. We have clean air. We have safe cities. We have great work ethic. We have business friendly environments. Pacific Life Insurance Company is headquartered in Nebraska. Why? Because we're business friendly, particularly to insurance companies. I don't care-- I'm not concerned at all about business leaving Nebraska. The businesses that want to be here, we're going to build a great business environment and people will want to work for those companies. Thank you, Mr. President.

**KELLY:** Thank you, Senator Jacobson. Senator Bosn, you're recognized to speak.

BOSN: Thank you, Mr. President. I want to start by saying that the narrative that has been present for my duration of time here has been that anyone who opposes this -- or anyone who supports this bill or, or its amendment hates transgender children, wishes to kill transgender children, or does not care about women's rights. And I want to correct that because that is not true, at least as far as I am concerned. To my friends, my family members, and my colleagues who belong to the LGBTQ+ IA category, I do not hate you. I do not hate your family members. I do not hate your children. I don't, I don't even know how to correct something that's so offensive and misleading. But it is not true. It has never been true. And it will never be true about myself. No matter what anyone stands up and says about how I feel or if I really felt that way I do this, I don't-- I can't capitulate on that fact. It is not true. This bill isn't about being unsupportive of transgender children. It's about preventing irreversible changes to their bodies until they're adults. I'm not opposed to things that people are saying I'm opposed to. I don't think anyone in this room really is. This isn't about ignoring women's rights. It's about

protecting the rights of babies who have the right to live. This bill is about protecting the rights of children to be children and to let them grow. And with that, Mr. President, I would yield the rest of my time to Senator Kauth.

KELLY: Thank you, Senator Bosn. Senator Kauth, you have 3:15 seconds.

KAUTH: Thank you, Mr. President. And Senator Bosn, very well said and welcome to the Legislature. You're killing it. I would like to thank every single one of the senators that I work with who has been kind and considerate and thoughtful in these discussions, who has pushed back and has given good reasons for it, who has taken the time to work with me on this bill, and who has supported it and supported me. It is so very much appreciated because we have been, been swamped with hate, with nasty messages, with our colleagues demanding that we be collegial even as they spew hatred at us directly. I do not underestimate the toll this has taken on everyone and I wanted you to know on the record that I appreciate you all. I'm going to read something from one of my constituents: As a physician of 25 years-- we have a lot of doctors who have, who have voiced opinions on this, this is someone who's read the bill-- I've seen patients that have been placed on hormone blockers or hormones to attempt to transition them. They were all adults who could make informed decisions. That is what we have to stress, this is about adults can make these decisions. Children cannot. Every one of them, despite if they were taking masculine or feminine hormones, had severe side effects with their liver and kidneys. These hormones are not safe in fully mature people and are certainly not safe in people with bodies that have not yet matured. These medications are not FDA-approved for these uses and no one knows the long-term side effects of them. Please protect our children and let them grow up safely. And, Doctor, that is exactly what this bill is intended to do. And I want to stress, this is a doctor saying that these drugs have not been tested. They are--

KELLY: One minute.

**KAUTH:** --not-- thank you, Mr. President-- they are not FDA approved for this use. We don't let our kids eat preservatives. We are very concerned about what goes into their bodies. We try to take care of them in so many different ways. But yet when we have an experimental medication that has no long-term data in children, it seems-- it-- Mr. President.

KELLY: Speaker Arch, you're recognized.

ARCH: I would ask that you clear the balconies.

**KELLY:** We'll ask security to clear the balconies, please. Secur-- if one side could hold until you're asked to leave by security.

ARCH: We will, we will stand in recess.

KELLY: Speaker Arch, you are recognized.

ARCH: I can't hear you. We stand at ease.

**KELLY:** Members, we will stand at ease.

[EASE]

KELLY: Speaker Arch, you are recognized.

ARCH: Thank you, Mr. President. It was our understanding with the State Patrol that if one balcony needed to be cleared, we would clear both balconies. That is what has occurred. We will now resume debate. Mr. President, you may proceed.

**KELLY:** Thank you, Mr. Speaker. Senator Kauth, you're recognized to continue on your time.

KAUTH: Do you know how much I had left?

KELLY: One minute. One minute.

KAUTH: Thank you. So that is actually a very, very good representation of what all the hateful rhetoric has done. It's created this kind of an atmosphere where we no longer discuss and debate, where people throw things down from balconies and scream at us while we are trying to do our jobs. This bill is about protecting children. That is it. It's titled "Let Them Grow." Let them grow to be adults and they can make whatever decisions it is that they want and we will support and encourage and love them. There is no hate on this side of the--

KELLY: That's your time, Senator.

KAUTH: Thank you, Mr. President.

KELLY: Excuse me, excuse me, you have 17 seconds.

**KAUTH:** Thank you, Mr. President. I appreciate it. I didn't hear you very well because of the yelling outside. Thank you very much to the

State Patrol for your efforts in keeping us safe today. I appreciate it very much.

**KELLY:** That's your time, Senator. Thank you. Senator Moser, you're recognized to speak.

MOSER: I think sometimes how we conduct ourselves inside this Legislative Chamber is infectious and it, and it causes other people to act out. I think we need to treat each other with respect regardless of where we come from, how much money we have, what we believe in. We should talk to each other. We should answer each other's questions. I think we should work together. Now, back to the bill at hand. The abortion part of the bill is not a ban. It changes the date, the-- from 20 weeks to 12. And already, 90 percent of the abortions that occur in Nebraska are before 12 weeks. That's from the DHHS website. You can check on it if you want, it's a public website, anybody can look at it. Back to the gender part of the bill, there's such a influx of young people concerned about their gender, what gender they were biologically determined to have, and then what they would really rather be. And my reason for being interested in supporting the bill is that I feel like parents are vulnerable when their kids aren't happy and they, they want to do something to address that. And the parents want their kids to be happy and so they search out, they're looking for something that, you know, could help. But when I was looking, researching what they do to address this angst of not being the gender that they'd rather be, I looked at the Mayo Clinic website and they've got a good website that talks a lot about the issues and it talks a little bit about both sides. But one thing I wanted to talk about or some of the things I wanted to talk about are the negative effects of taking puberty blockers. They can affect your growth, they can affect your growth-- your bone growth and density. They can affect your future fertility. Children have to be checked for height every few months, they have to check their bone density. Depending on when you start them, you have different combinations of possible complications. But here are a couple of-- here's a sentence that it kind of speaks to me more than the others. It says: Keep in mind that some of these changes -- they're talking about changes from taking puberty blockers-- are not reversible and-- or will require surgery to reverse the effects. So to me, those are the things we're trying to not do to adolescent children. Let them get of age and whatever they want to do when they're old enough, you know, is, is up to them. It's their life. But when they're young and impressionable, I think parents should let them grow and, and -- because they're going to change over time. Hormones will change naturally. And until you've matured, you don't know how you're going to feel about the other, the

other sex or the same sex. I-- you know, you may have feelings that come and go during that time. I don't know. But I think you should wait and see how things develop before you do something that you can't reverse or that you have to do surgery to reverse. With that, I'd yield the rest of my time to Senator Hansen.

KELLY: Thank you, Senator Moser. Senator Hansen, you have 59 seconds.

HANSEN: OK. I'll do my best here. I, I was hoping to answer some of John Cavanaugh's questions when I got some clarification, but I, I at least wanted to run through the, the— how the rules and regulations will be promulgated. This was a question I got among both, in support and opposition. So first, like we talk about the chief medical officer, chief medical officer along with DHHS will draft— have, have an agency rule drafting of the rules and regulations when they meet. That will then go to a 30-day public notice for, for, you know, all the shareholders to kind of get involved, people who want to have their opinion heard, and then they will have a hearing and, you know, a public hearing where people can come and, and testify and give their opinion what they think is— what— how best these should be— rules should be promulgated, how best the— some of the stuff should be used. And after the hearing then, it will go to the AG's Office to see if it passes—

KELLY: That's your time, Senator.

HANSEN: Thank you.

KELLY: Thank you. Senator DeBoer, you're recognized to speak.

DeBOER: Thank you, Mr. President. Colleagues, as I'm, I'm sitting here, I'm reflecting on a number of different things. I have been all day. The first and foremost thing I will say is that I do not think this can be about sides. It, it just can't be about sides. It has to be about Nebraska and Nebraskans. Today, before I came here and before I heard anything anyone had to say this morning I was reflecting on Exodus 7:3-4: But I will harden Pharaoh's heart, and I will multiple my-- multiply my signs and wonders in the land of Egypt. When Pharaoh doesn't listen, I will lay my hand upon Egypt. I was thinking about that because it's one of the most troubling passages for me. God hardens Pharaoh's heart. And then when Pharaoh doesn't listen, there's punishment for Pharaoh. I don't have an answer for that one. But I will say that I know here in this Chamber our hearts are hardened and that makes me scared. I then reflect on the fact that a third of the population of Europe was killed in the Thirty Years' War, which was

started and sustained primarily over the question of who gets to speak for God. And after 30 years of that, half the population of Germany being gone, everyone sort of decided they were tired of killing each other over that question. And that decision to stop killing each other over the question of who gets to speak for God was some of the main inspiration for John Locke and other philosophers who our founders borrowed from when creating this country and why the separation of church and state, personal convictions, and government actions was so important to them. I see what's happening here and across the country and I sometimes ask is there an America left? I keep reflecting on that. Senator Blood says democracy is messy and it's really been messy a lot lately. Democracy is messy, Pharaoh's heart is hardened, and I wonder if there's an America left. The wounds from this process, this bill, they're not going to go away quickly, not for the people whose lives are affected and not for any of us.

KELLY: One minute.

**DeBOER:** I guess my final plea is that for those of you who don't want to vote for this bill but feel compelled to because of other influences outside of this body, outside of yourself, I'll say vote how you want to have voted 20 years from now in the middle of the night when you reflect back on this day. If there's any time left, I'll yield it to Senator Wishart.

**KELLY:** Senator Wishart, you have 30 seconds.

WISHART: Well, thank you, Mr. President. Thirty seconds is not easy to, to get out what I wanted to talk about. It's just hard to put into words what has been the experience this session and this day. But when it ultimately comes down to it, I think that people have the right to their bodies. And I think that's a right that goes way--

KELLY: That's your time.

WISHART: -- beyond constitutional rights. Thank you.

KELLY: Thank you, Senator Wishart. Senator von Gillern.

von GILLERN: Thank you, Mr. President. I rise today in support of
LB574 and AM1658. I'm determined when the session is over, I'm going
to download the Journal and see if I can do a word search and see how
many times the word "hate" has been used this year. I find it
tragically ironic that Senator Hunt shares an incredibly personal and
pri-- [INAUDIBLE]-- with the state, with the world. And then shares it
again and again and again in a completely self-serving manner. But

when Senator Aquilar shares a similar story, and I note a personal family journey that was completely framed in love, he's attacked repeatedly by Senator Hunt. The double standard is embarrassing. So much for sharing the challenges in our lives and lifting one another up on our journeys. Way to go in marginalizing another person's story and in turn marginalizing that individual and his family. The family, Senator Hunt, that you would claim to embrace. Apparently, if it's not your story, it doesn't count. If Senator Hunt expects us to receive her story with love and compassion and kindness, as she has said, and as we should, then I call on her to be the first to demonstrate that love and compassion to this body and to her constituents and to the state. But no, we hear over and over again how much we hate people. I haven't heard the word hate used by any proponent of this legislation, either publicly or privately. Senator Hunt said that Senator Jacobson's wife's D and C was an abortion, again marginalizing a tragic personal story of another individual who was brave enough to share their personal story. And again, another lie to fit the narrative. But to hell with them. It's not Senator Hunt's story, so it doesn't matter. Removal of fetal tissue after the baby has passed is not now nor ever has been an abortion. A successful abortion is defined as one where the baby dies, period. When LB574 was first debated, debated, there were two individuals in the building meeting with senators who had experienced transition but later realized they were not trans, they were gay. Senator Machaela Cavanaugh confronted me on the first floor that morning in a complete panic that we had met with them. She stated that they didn't belong here, that they were inciting possible violence and causing fear for those demonstrating here today. I responded that I was simply doing what I thought was right and what she and others have encouraged those of us horrible conservatives to do: I was listening to those who have had a different life experience than my own in an attempt to understand them. She was in a panic over this because the narrative of these individuals did not fit with her own. How narrow-minded. Yesterday, Senator Machaela Cavanaugh said, if you have an ectopic pregnancy, you should run to the doctor and get it taken care of. First of all, how completely insensitive of her to minimize anyone who's going through such a tragedy. Shame on you for using someone's personal crisis to move your political ball down the field. Secondly, it was a complete and boldfaced lie, as we've seen Senator Macav-- Machaela Cavanaugh do all year long: lie after lie after lie. AM1658, page 1, line 13 declares specifically that ectopic pregnancies are excluded. She knows this, but she still spreads the lies. She went on to say that if your child's brain is floating around outside its body, you'd better get to the doctor right away and get it taken care of. Again, how completely

and incredibly insensitive. I was nearly brought to tears last night, thinking that somewhere in Nebraska there's a real person, a real mom, a real woman who just found out that indeed they have a child with a fetal anomaly and they're trying to figure out what to do about it. Senator Raybould read a letter today stating, if I have to face going to prison to do my job, then we'll leave the state. Again, lies, baldfaced lies. If you say something long enough, loud enough, some people will believe it. The consequences of violating this law--

**KELLY:** One minute.

von GILLERN: --would be the same as any physician were to perform an improper surgery or commit malpractice. Senator Day made a point to discuss the negative economic impact of this bill passing. Senator Day, I will never make this a conversation around economics. No matter how many businesses you bully into signing a petition or letter, no matter how many conferences choose to go elsewhere, no matter how many doctors threaten to leave, I will never sacrifice the life of an unborn baby or a child for economics. Never. To the senators I just addressed, you are the epitome of what you claim to be fighting against. You use lies to promote your agenda, you bully people and organizations, and you hate others who don't believe as you do. I see Senator Hunt's up after me in the queue and I'm sure I'll be her next victim. I only ask that she stick to the truth when she does so. Thank you, Mr. President.

KELLY: Thank you, Senator. Senator Hunt, you're recognized to speak.

HUNT: Thank you, Mr. President. Senator von Gillern's got bars. I didn't say anything wrong, and I don't regret anything I've said. And let's see somebody legislate a bill that goes against one of your children and see how you act. I said what I said, and I'm right. I would like to yield my time to Senator Conrad.

**KELLY:** Senator Conrad, you have 4:35.

CONRAD: Thank you, Mr. President. Thank you, Senator Hunt. Colleagues, I'm going to try and build the record as clearly as I can. So I apologize, I don't normally reads floor speeches, but I want to be precise. Because AM1658 merges two separate bills, that happened about three days ago, colleagues, LB574 and various components of LB626, that was put forward without a bill introduction in the first ten days, without a public hearing in contravention of our rules. It is improper for the Legislature to combine the bills as it violates the single-subject law. Article III, Section 14 requires: No bills shall

contain more than one subject and, colleagues, and the subject shall be clearly expressed in the title. Look at LB574, Adopt the Let Them Grow Act and the Pre-Born Child Protection Act and provide for discipline under the Uniform Credentialing Act. There are three distinct subjects in the measure in contravention of Article III, Section 14. This measure has been brought forward in contravention of our rules and is also nongermane. It's critical to acknowledge what's happening here. A desired result: raw political power. And this isn't about name calling to other members in this Chamber, this is about taking away fundamental parental rights. This is about a violation of due process and equal protection. These are values that we all hold dear as Americans and as Nebraskans. The measure before us in the amendment is not a compromise, it is a hastily considered restructuring of the original LB574 and a 12-week do-over abortion ban since LB626 failed. It makes a mockery of the recommendations suggested in good faith by the discussions arranged by the Speaker. It undermines parental rights. It inserts more uncertainty, vagueness and fear because it abdicates our responsibility for policymaking to a political appointee who has already demonstrated their willingness to ignore medical expertise in order to pass a ban. Colleagues, I talked with you about the series of abortion restrictions in the modern history of the Nebraska Legislature. Each and every one of those measures were brought forward according to our rules and our Constitution. None of them had an emergency clause on them to ensure all stakeholders had an opportunity to ensure thoughtful implementation. We do not need another round of debate to cure this defect. This amendment was adopted in contravention of our practice less than three days ago and will become law with an E clause the day after it is signed by the Governor. If one person does not vote for the measure with the E clause, you can still vote for cloture. You can still vote for the underlying bill. It won't change a word of the policy you're putting forward. But I am begging you to find one vote--

KELLY: One minute.

CONRAD: --on the E clause to give all stakeholders an opportunity to implement the bill thoughtfully. Senator Kauth's provision already has a later implementation date. You will not be disturbing that in any way, shape or form. By removing the E clause, the measure will still pass, but it will be implemented in a thoughtful way, in pattern and practice with our past policy proclamations. Our rules give us this last minute opportunity to get it right. You can still advance your conscience and you can ensure a thoughtful implementation. It's a momentarily withholding of one vote to allow for the bill to move forward and thoughtful implementation. I'm asking you to dig deep and

consider the practical realities which are critical to our duty as legislators to--

**KELLY:** That's your time, Senator.

**CONRAD:** --ensure we do not ensuare stakeholders unnecessarily. Thank you, Mr. President.

**KELLY:** Thank you, Senator Conrad. Senator Fredrickson, you're recognized to speak.

FREDRICKSON: Thank you, Mr. President. Good afternoon, colleagues. You know, I'm not under any illusion as to how today's going to go and where we are with all of this as a body. And I've been watching all this today and thinking about the emotion that's both here in the Chamber, but also obviously out in the Rotunda and what was up in the balconies. And I spoke a little bit about this yesterday, and I think it's worth just kind of going back to again. And I'm not going to talk about how we feel about the bill or things like that, but what I do want to talk about is how we're making policy in here. And I spoke yesterday about how, you know, the architects of these, of bills like LB574 and the transgender bills that we're seeing across the entire country, they, they've come out talking about how they've done polling to see what can rile people up and get their base riled up. And I think everything we're seeing in here amongst ourselves, in the Rotunda, this is underscoring and highlighting that that is what's happening with this bill here. This is not a bill that is designed for good policy, it's a bill that's designed to capitalize on emotion. And I know I'm a freshman senator, so I don't have years and years of experience in this legislative body, but I don't think any of us can sit here and think that, well-- that this is not-- like this is not normal, what we're-- what's going on within the Chamber, but without-outside of it as well. And I think that that is really underscoring what's, what's happened here. And again, I don't know-- I don't, I don't, I don't know where we go from here. I don't know where we go from here, but what I do hope we can do is take the lessons that we're learning from this, and I hope this can help us inform our policymaking moving forward. With that, I'll yield any remaining time I have to Senator Dungan.

**KELLY:** Senat-- Senator Dungan, 1:30.

**DUNGAN:** Thank you, Mr. President. Colleagues, I do rise again in adamant opposition to LB574 and in favor of AM1474. So I just wanted to kind of shift the conversation briefly back to some of the things

that Senator John Cavanaugh had started talking about earlier. I know he's up next, so he's going to continue this conversation. But one of the main problems with this bill that has not even been discussed yet, because this is a new amendment we just saw four days ago, is that it is, in fact, an unlawful and unconstitutional delegation of authority by the Legislature to an elected official— or to an appointed official.

KELLY: One minute.

DUNGAN: So thank you, Mr. President. We know that the Legislature can delegate authority in certain circumstances, right? That's something we do from time to time. But it's been very, very clear that limitations of power granted -- and I'm sorry -- that we have to make sure that if we are giving authority to an administrative agency or to an elected official, it has to meet certain criteria. It must be clearly and definitely stated in the authorizing act what the parameters of that delegation are. The delegation cannot be indefinite, obscure or vague or based upon extrinsic evidence that's not readily available. Colleagues, that is exactly what's happening in this law. The CMO being able to-- being delegated the authority to create rules and regulations pertaining how individuals access care is an absolute unlawful, unconstitutional delegation of our authority as a Legislature. So we're going to get a little bit more into the details of that, but I want to make sure that when you think about this legislation, it's not just about whether you agree with the intent or not.

KELLY: That's your time, Senator.

DUNGAN: It's whether-- thank you, Mr. President.

**KELLY:** Thank you, Senator Dungan. Senator John Cavanaugh, you're recognized to speak.

J. CAVANAUGH: Thank you, Mr. President. Colleagues, again, I rise in opposition to LB574, and I did want to touch on my amendment, AM1474. The reason I brought this amendment. So AM1474 was the product of the conversations, negotiations we had and addressed the concerns— or attempts to address the concerns of folks who are in favor of this bill. It does so in a specific, clear, direct way. It puts limitations on what type of care can be offered, it puts specific requirements, it has clarity, and it is definite, as opposed to the bill we're talking about here is vague. I talked to Senator Hansen. I appreciate him going to get those answers. I would ask where in the bill are the

answers that Senator Hansen just gave us? They're not there. This bill is unclear. The delegation of authority that Senator Dungan just talked about is indefinite. It's not specific. It's vague. There's no limit on that delegation of authority. This bill gives to the chief medical officer the ability to make rules on par with the ability to write laws. We are supplanting -- my amendment -- or my amendment would supplant that delegation of authority to the chief medical officer. And what this bill does is puts the chief medical officer in the position of the Legislature for making the regulations that my amendment makes. So it is an unlawful delegation of our authority. We don't put any limits on it. Additionally, this bill violates the single-subject rule, as Senator Conrad talked about. I objected on germaneness on the last round. This bill takes up two distinct subjects, covers two distinct acts of our statute. It addresses care for transgender youth and, and separately addresses abortion care. Two completely different things. You go to two different doctors for that. And what we know from the negotiations and we know from what people have said on the floor here, is that the reason the abortion part was added was because the transgender part could not pass without it. That's the reason. Not that they're, they're of the same subject, not that they cover the same material, but because one could not pass without the other. And clearly, the abortion bill couldn't pass without the trans bill because we had to bring it back to life, right? It's a zombie bill. So they are not of the same subject. They violate our constitutional prohibition on single subject. And one bill is being used to induce your vote for the other, which is one of the reasons we have the single-subject rule, is so that when you vote for something, you vote for it and not the thing that it's attached to. You should not -- we should not be inducing votes through this sort of combining unrelated subjects. So I did want to talk about my-- the difference between my amendment and this amendment. My amendment puts out specific number of months that a person must be receiving care for their transgender -- for gender incongruity, I think, is the right word. Twelve months. Puts out a specific number of months somebody must get care for that before they can pursue--

**KELLY:** One minute.

J. CAVANAUGH: --a surgical option. My amendment puts require-specific requirements of two doctors have to agree to diagnose
somebody before they can get care. Specific. We know how many doctors,
we know what they have to get. We-- my amendment includes the findings
that they would have to find in compliance with medical practice to
make that diagnosis. This bill is unclear. It does not tell us how
long the waiting period is going to be, does not tell us how many

hours of therapy someone is going to have to go through, does not tell us which medicines will be approved and by whom. And the answers we've received here are not within the bill. There's a lot of assumptions and guesses and presumptions in this bill. There are not facts, specific delegations. We do not know what's going to happen when this bill goes into effect, which is one of the reasons we should not have the E clause. But we're rushing to this. This bill was introduced about a week and a half ago, to make some pretty rad—

KELLY: That's your time.

J. CAVANAUGH: Thank you, Mr. President.

**KELLY:** Thank you, Senator Cavanaugh. Senator Machaela Cavanaugh, you're recognized to speak.

M. CAVANAUGH: Thank you, Mr. President. To those watching, you are loved, you matter. You are worth fighting for, and I will continue fighting for you. Mr. President, I yield my time to Senator George Dungan.

**KELLY:** Senator Dungan, that's 4:45.

DUNGAN: Thank you, Mr. President. And colleagues, I'll try not to speed through this too much, but we have such a limited amount of time, and I truly want you to pay attention to this, if you're listening at all. Because this is not a rehashing of a conversation we've had before, this is unique to this amendment which is just being debated now here today, essentially for the first time. As I was saying, this is an unlawful and unconstitutional delegation of authority to the chief medical officer. What we know is that in order for the delegation of authority to be valid and to be upheld by the courts, there has to be reasonable limitations on the authority that's been delegated. The courts have said that reasonable limitations and standards as to the delegation are necessary or otherwise it's going to be unconstitutional. And digging deeper into what that actually means, they specifically have already found, in prior overturning of delegation of authority, that the delegation of the authority has to be limited, controlled and to a determinable degree. So if you look at the fact that there's reasonable standards that have to be in place for that delegation and then compare that to the delegation of authority that's being given the chief medical officer in LB574 with this amendment, it simply doesn't hold up. And this is not a stretch. I'm not trying to just throw a wrench in the cogs here at the last minute to get people to go against this. If you specifically look at

what Senator Cavanaugh was talking about earlier, the vague criteria that's outlined with regards to the chief medical officer, it specifically says on page 15, line 23, that the rules and regulations that they're being delegated the authority to promulgate have to include, at a minimum, the following, at a minimum the following, and it goes on to list four-- or three subsections that those rules have to include. It doesn't give us any indication as to how they consider it, what evidence to look at. But it's -- it delegates them the unlimited authority to say thou shalt create these rules which have to, at a minimum, include these three things. But there is no ceiling to that. It is unlimited. So the rules and regulations they've been delegated the authority to promulgate do not have any kind of reasonable limitation whatsoever. Colleagues, that is an unconstitutional delegation of authority. Moreover, when they get into the things that the rules can consider with regards to the allowance of nonsurgical gender-affirming care, and it says that they shall, at a minimum, page 16, line 3, set forth the following. And that gets into the vague things that Senator John Cavanaugh just talked about. But again, it's a minimum. So there's four things that they have to put into their rules and regulations there. But there is no limit on five, six, seven, eight, nine, ten, 11, 12. Go talk to two clergy members, get a letter, jump through this hoop, do 1,000 hours of therapy. We don't know what those are. So the chief medical officer, by virtue of this amendment, is being delegated unlimited and unrestrained authority in setting those standards. And the courts have found over and over again that they have to be limited, controlled and done to a determinable degree. The fact that there is no determinable degree on what those are is incredibly problematic. Moreover, colleagues, the fact that the CMO, the chief medical officer, is being given the authority of the Legislature, and then DHHS, which is an agency, has to promulgate their own rules pursuant to whatever the chief medical officer comes up with, is also a problem. The fact that the rules that get come up with-- that are promulgated by DHHS cannot contradict and have to be in accordance with the rules of the chief medical officer, essentially say that what this chief medical officer says goes, that becomes the law of the land. We've delegated that authority to the CMO. And then DHHS, based on what the CMO has come up with, can then make their own rules up. DHHS promulgates their own rules, but they have to be in congruence with and in accordance with--

KELLY: One minute.

**DORN:** Thank you, Mr. President -- the rules of the chief medical officer, again, who is not an elected official, they're an appointed official. And so the very fact that there is not a single limitation

on what can and can't be considered, there is no guidance in this with regards to best practices or what the chief medical officer needs to look at in order to make these determinations, is not just problematic, colleagues. It is unconstitutional. We've had four days to look at this. We have not gotten a chance to look into it. I'm not trying to pull the wool over your eyes. Please look at the law. Look at the fact that there is no limitation on the CMO whatsoever and understand that that is an unlawful delegation of authority. I would also encourage my colleagues to continue to consider the emergency clause being removed. We haven't had enough time to look at this. We have to dig into it more. You can vote for cloture on this bill, we just need a little more time to figure out how to implement aspects of this that just got added into the bill this week. Thank you, Mr. President.

**KELLY:** Thank you, Senator Dungan. Senator Bostelman, you're recognized to speak.

BOSTELMAN: Thank you, Mr. President. I want to speak from-- or read from an article out of On Science, issue 12, April 2 [SIC-- 25], 2023. It's the 12 Amazing Facts About Developing Human Beings at 12 Weeks of Gestation. I want to get back to kind of what the bill is talking about and what we're, what we're talking about here today. The first thing is, all of the major organs have formed. Almost every organ and tissue form by 12 weeks. The remainder of the pregnancy is spent growing these organs larger and more mature to prepare for life outside of the womb. By ten weeks gestation, she will already have over 90 percent of the more than 40--4,500 named structures in the adult body, including arms, legs, fingers, toes, a face and eyelids. The digestive system, skin and muscles have all started to function. The fetus may still be small at 12 weeks, about two and a half inches in length, weighing less than an ounce. But she is already an incredibly complex and multi-faceted human being. Number two, the four-chambered heart pumps over six quarts of blood per day. The four chambers of the heart formed by the eight gestations -- by the eighth gestation week, the heart reaches its final shape by ten weeks. The heart is a vital source of circulation of nutrients, nutrients and oxygen-carrying blood. The heart and circulation system of a 12-week-old fetus pumps an average of six quarts of blood per day, which is equivalent to one and a half gallons of milk. For comparison, the adult heart pumps 6,000 quarts of blood per each day. Number three, the heart has already beat over 10 million times. About 22 days after fertilization, six weeks of gestation, the heart starts to beat rhythmically. The average heart rate is, at 12 weeks, is 167 beats per minute. By then, the heart has already beat over 10 million times.

Number four, each finger moves separately. Starting at ten and a half weeks gestation, then something -- when something touches the fetus' hand, he starts to close his fingers. By ten weeks, he will bring his hands together and touch his face. Typically, the fetus moves all, all of his fingers together except the thumb. Over the next few weeks, he starts to bend his fingers more deeply and move his thumb. If we were grasp-- as if he were grasp-- grasping an object. By 12 weeks gestation, the fetus moves each finger separately and spontaneously explores his environment with his fingers. Number five, the fetus sucks his thumb, which is-- with a preference for his left or right hand. As early as ten weeks gestation, it is possible to determine whether the unborn child has-- is left-handed or right-handed by studying the ultrasound. Number six, unique fingerprints are forming. Every human being has unique fingerprints with-- which start forming during the 12th week of gestation. Number seven, fet-- the fetus has a face. By the 12th week of gestation, the fetus has a recognizable face with prominent face features, including a forehead, nose, cheeks, jaw, tongue, upper and lower lips, eyes and ears. Eight, the fetus exhibits complex behaviors. By 12 weeks gestation, the fetal-- fetus shows complex behaviors such as yawning, stretching, swallowing, scrunching hands into little fists, touching her face and scratching her head. The fetus can now bend her elbows and bring her hands together, squint, grasp and point her toes. She even makes intermittent breathing motions. Number nine, teeth are developing. Teeth start to develop as buds in the ninth week of gestation. Around 11 weeks of gestation, the buds of the permanent teeth--

**KELLY:** One minute.

BOSTELMAN: --start to develop underneath the baby teeth. Number ten, the body responds to touch and may experience pain. The touch receptors can be seen around the mouth and hands at seven and one-half weeks of gestation and the embryo starts to reflex and move away from at eight weeks. Nerve synapses from-- for spinal reflex are completely in place by ten weeks. Pain receptors begin forming at seven weeks gestation age, with the nerves linking pain receptors to pain-sensing part of the brain. In conclusion, if one follows the science it's clear that pre-born children at 12 weeks gestation are already amazing, complex human beings. All of the major internal organs are formed and are already functioning, including the heart. They start forming brain connections and this will last into adulthood. Our developing unique fingerprints are already show--

KELLY: That's your time, Senator.

BOSTELMAN: Thank you.

**KELLY:** Thank you, Senator Bostelman. Senator Blood, you're recognized to speak.

BLOOD: Thank you, Mr. President. Fellow senators, friends all. Excuse me. I vote in support, speak on support of the return to Select File and against the underlying bill. And I have to say, Senator Kauth and others, I agree. You are absolutely right. The adults can make the de-- those, the adults can make these decisions and children cannot. You keep saying that. But then you take away the right to do so and continue to either unknowingly or knowingly lie about how-- I can count on one hand how many children this bill actually affects in Nebraska every year. I have five fingers, friends. And by the way, Senator Murman, so much for your Parental Bill of Rights. So, again, because you've rushed this amendment and you've not had a 407 process, which we do for all scope of practice, and you suggest that this does not apply to IVF as you did the previous year's bill, but then you define "preborn" child as anything throughout the embryonic and fetal stages of development. IVF can't happen unless the embryo has been fertilized. So you have unknowingly, friends, yet again taken IVF away based on the way this bill is written. And Senator Jacobson, who has wandered off, you and I are not doctors. "Preborn" is not a medical term and does not belong in law, period. Unborn is only a medical term at 11 weeks. So you can keep standing here and saying "preborn" and unborn, but it does not change the fact that you are willing to put those words into state statute. I have not stood here and called names, I have not stood here and threatened you. I have, from the very beginning, told you that this is a very defective bill and to please fix it. And you have not done so, nor chosen to do so. With that, I would yield any time I have left to Senator Vargas.

KELLY: Senator Vargas, you have 2:42.

VARGAS: Thank you very much, Senator. Thank you, Senator Blood. As policymakers, we should not be limiting the expertise of doctors and nurses. I've been very, very clear with that. You've heard it from my colleagues. You've heard it on the mike. We cannot pick and choose when we listen to policy—we listen to associations on so many different levels to inform our policymaking. And we are disregarding 1,400 individuals in the healthcare profession right now. Second, we talk about consistently elevating experts, but what we're doing here, not elevating experts just in their field, we are delegating an unreasonable set of circumstances in this amendment. The significant authority to an unelected, appointed individual, the chief medical

officer, is something that I have not seen in my time. People debated whether or not during the pandemic we should be giving this type of power to unelected individuals, but here we're giving it carte blanche to the chief medical officer and disregarding all the other elected—all the other policymakers in the healthcare profession. We're setting different standards. This is not a small bill. These are two consistently separate ideas, one of which did not have a hearing, did not have people that were able to engage in it. It still has and lacks a significant amount of details on what powers are given to the chief medical officer. And if you've looked at any of the bills that we have worked on in years within healthcare, we have worked with—

**KELLY:** One minute.

VARGAS: --associations, we have worked with appointed groups of individuals that help inform it. This does not do that. This gives it to the Board of Health and chief medical officer. I can't just say it's a tricky slope. It is a very dangerous slope to be going down this route. We've never done something like this. We shouldn't do something like this. It's the reason why we have been laying down the groundwork for the policy argument. I continue to stand against LB574, because ultimately decisions about care for transgender youth and about maternal health and their bodies should be made by families, individuals, doctors, mental health professionals. These established medical practices are rooted in science and should be. And politicians have absolutely no place in this process. That's what this should be about. I'm hoping we have somebody that is brave enough to step up and change their vote. And that is also--

KELLY: That's your time, Senator.

VARGAS: Thank you.

**KELLY:** Thank you, Senator Vargas. Senator Halloran, you're recognized to speak.

HALLORAN: Thank you, Mr. President. And I agree with Senator Vargas. I hope he's brave enough to change his vote. I would like to challenge Senator Conrad's conclusion. She suggested that this bill, LB574 as amended by AM1658, is gender-based discrimination. For the record, LB574 and AM1658 is not gender-based discrimination. This is protecting both biological sexes. On another note, there's been some discussion—discussion on the part of Senator John Cavanaugh and Senator Dungan and Senator Danielle Conrad in regard to whether or not this violates the single-subject rule. I find that a novel argument,

since we have been through at least a week or better of dealing with what we affectionately call "Christmas tree" bills. More technically, they're omnibus bills where bills are packaged together, many different subjects. Arguably none of them-- some of them not related to the other. And I saw no challenge on the part of Senator John Cavanaugh, Cavanaugh, Senator Danielle Conrad or Senator Dungan on the single-subject rule. They sat quiet. Now, all of a sudden, that's a constitutional issue, that they're, they're elevated to make an argument that this should not go through. Another note, the Legislature in the past has passed dozens of bills over the decades, dozens of bills and they have, they have allowed the agencies that that legislation pertain to to promulgate the rules. Now, suddenly, this is a, this is a challengeable issue. So not being a lawyer, I'm going to quit on those legal subjects. But I would, I would give the balance of my time to Senator Steve Erdman. Senator Steve Erdman. Senator Steve Erdman.

DORN: Senator Erdman, you're yielded 2:50.

ERDMAN: Thank you. Thank you, Mr. President. Thank you, Senator Halloran. I had an idea suggested to me a couple of weeks ago by a good friend of mine about putting a memorial up for those babies that have been aborted since Roe v. Wade started 49 years ago. I think it's a great idea. We have a memorial for Vietnam people, for World War II, I, all of those. We have a marker for Unknown Soldier. Memorial Day is coming up. I think this is a great idea and we can put an inscription on similar to this: This is to remember the unborn killed. We won't recognize them for they never -- we never saw them. We won't be able to find them because their body parts have been scrambled like eggs. They didn't choose to be killed. Someone else made that choice for them. Governors never saved them, legislators never protected them, the judges never listened to them. They were never loved by their mother or their father. Instead, they were considered inconvenient, suctioned into a tube and discarded like refuse. Although they had hands and eyes and legs and arms and a heart, they were never considered persons worthy of a proper burial. I would commit the rest of my time to a--

DORN: One minute.

ERDMAN: --moment of silence in those who have, have been killed.

DORN: Time.

ERDMAN: Thank you.

DORN: Thank you, Senator Halloran and Senator Erdman. Senator Hughes, you're recognized to speak.

HUGHES: Thank you, Mr. President. I'm going to repeat some things I've heard earlier from some of my colleagues. I also am so tired of hearing how much of a hater I am, and all this about hating the LGBTO community. The only people using the word hate the most is Senator Machaela Cavanaugh and Senator Megan Hunt. This is not an anti-trans bill. This is about kids. This is about waiting and slowing down before going down a path with permanent consequence. My biggest concern with this came when I spoke to Planned Parenthood one day that they called me out to the Rotunda. Yes, because when people call me out, I actually go out and listen. Doesn't matter what side of the story they're on, I will listen. I was so surprised. Why would Planned Parenthood be involved in gender-affirming care? To me, Planned Parenthood is about reproductive care, providing birth control, checking for STDs, etcetera. So let me just read what is on their website, and I printed it off. We offer transgender hormone therapy using an informed consent model. That means you do not need to participate in therapy or get a referral to receive your hormone therapy. We support our patients in making the decision that is best for them. Patients in Minnesota and Nebraska must be at least 16 years old and post-puberty to qualify for this service. And yes, they'll have to bring a parent or guardian, but they do not have to participate in therapy to get that. This is exactly why something needs to be done. You need to participate in therapy before a teenager can walk in and get growth hormones. Once you start down this road, you cannot go back. How can plant parent -- Planned Parenthood do this without therapy first? I just want to remind everyone what the current version of this bill does. It stops surgeries on minors for purposes to change their gender, it allows any youth currently making -- taking growth hormones and puberty blockers to be able to continue, and it tasks the chief medical officer and HHS to develop standards before they go down this path. There needs to be a requirement for therapy before a child starts going down this path that results in a permanent outcome. We are not trying to prevent them from being who they are, we are simply saying they cannot have gender reassignment surgery before they're an adult and that they follow some rules and regulations established in order to access hormones and pubert -- puberty blockers before they are an adult. That is what this does. Thank you, Mr. President.

KELLY: Thank you, Senator. Senator Kauth, you're recognized to speak.

KAUTH: Thank you, Mr. President. Thank you, Jana, that was really well said. LB574 has come a long way. We've made changes. We've listened, we've adjusted. This bill is and always has been about protecting children. It does not discriminate based on sex. It protects children of both biological sexes. We are all apparently in agreement that a child's brain does not fully mature until their mid-twenties. Because we're in Nebraska, the age of majority is 19, something my kids really, really were upset about when we moved here. Let Them Grow only addresses those children who are under the age of majority. This is not about adults. This is about kids. This is the only reason we need to protect children from experimental, irreversible medications and surgical procedures. Their brains have not yet fully developed. They don't have the capacity to understand. They don't have the life experience to realize that what they feel one day may not be the same the next. There have been quite a few senators who've commented that they hope to bring bills that protect children in the future, and they expect anyone who supports the Let Them Grow bill to support their bills. If you're not voting for LB574, you're making a statement that you believe children are able to make these kind of decisions as children. You're saying that you believe a child's brain is fully developed. And so when it comes to issues like crime or other decisions that they might make, where we would ordinarily say, OK, they were a teenager, they weren't capable of making a decision. By not voting for this bill, you're saying you think that every child is capable of an adult decision. I will find it very, very difficult looking at bills going forward to trust the motivations of someone who uses that argument, if they are not voting for this bill. The very loud vocal opposition, some of whom have come from out of state to protest in the Rotunda, would have you believe that they are the majority of Nebraskans. They are not. The truth is, we all get emails, phone calls and cards saying thank you. Please get this passed, help protect our kids. I have doctors, psychiatrists, therapists, teachers, parents, transgender adults, and quite a few teenagers who have reached out to me and have agreed that kids should not be able to decide to use experimental, irreversible medications and surgeries to treat gender dysphoria. And yes, some of those teens have been dealing with gender dysphoria themselves. The teens that I corresponded with were fascinating, and they all talked about how they have made decisions as teenagers, and they're like 17 or 18 now. And they're talking about when they are 13 and 14 and going, wow, that was dumb. I shouldn't have done that. And they've said, you know what? We're glad that we're not held to the same standard of responsibility. And they got it. If kids can understand that and look and say, OK, yeah, maybe we are not ready for it, again, the adults in the room need to be

putting these guidelines in place. I love what Senator Brad von Gillern said about this is not an economic argument. We have had lots and lots of talk about North Carolina. I'd like to point out that when North Carolina did pass their bill, they did lose about \$3 billion over the course of six years. However, their economy grew to over \$500 billion. This year, they are putting forth six gender-related bills in their legislature.

KELLY: One minute.

KAUTH: Clearly-- thank you, Mr. President-- correlation is not causation. The states with the most progressive policies has seen the greatest loss of citizens. If you look at California, they ran out of U-hauls trying to get out of the state. Can we say that's because of their progressive liberal policies about gender? No, there's a lot of other factors. Associating this one bill with every bad thing that could possibly happen in Nebraska, whether it's people leaving, businesses not coming here, there's no data to support that. Correlation does not equal causation. I believe that we have a strong state, we have a great economy. We have people who care deeply, as you can see by all of the engagement in this bill. We're lowering our taxes, we're doing the things we need to to make ourselves more attractive to businesses and to keep people here.

KELLY: That's your time.

KAUTH: Thank you, Mr. President.

**KELLY:** Thank you, Senator Kauth. Senator Clements, you're recognized to speak.

CLEMENTS: Thank you, Mr. President. I rise in support again for LB574. I'd like to read a message I received from a Nebraska professional counselor on their opinion of gender transition procedures on minors. It's unthinkable to me as a licensed medical health professional and parent that we live in a time when people refer to the chemical sterilization of children as healthcare. The science is clear, children do not have a fully developed frontal lobe. The frontal lobe of the brain provides human beings the ability to fully ascertain how their actions will impact them and others. It is not developed until the age of 25. To be honest, this bill doesn't go far enough. No person should be able to mutilate themselves chemically or physically until they are mature enough to understand the long-term effects. You don't have to look far to see the devastation in the lives of detransitioners, all because of this great lie being perpetuated on

this generation. Medical professionals say puberty blocker treatments are fully reversible. Where are the studies? There are no long-term studies. These young people deserve compassionate care to help them address the root cause of their distress when it relates to their biological sex. No other mental health diagnosis is treated with the affirmation-only model. We don't affirm someone's suicidal ideation, we treat the maladaptive thinking patterns. I'm ashamed of my profession for perpetuating gender ideology at the expense of children. None of this should surprise us when considering that the same people who promote this destruction are completely fine with snuffing out human life in the womb for the purpose of convenience. Let them grow. A professional counselor from Nebraska, name withheld by me for their security. I yield the rest of my time to Senator Ben Hansen.

**KELLY:** Senator Hansen, that's 2:43.

HANSEN: Thank you, Mr. President. And so I kind of want to continue a little bit on about how I was discussing how the rules and regulations kind of get promulgated, like what the process is. And this is actually under the Nebraska Administrative Procedure Act. This can actually be found on the Secretary of State's website. This has to do with the drafting, and I think this is one of the questions Senator John Cavanaugh had, the amending and the repealing of rules and regulations. So again, first we have agency rule drafting from the chief medical officer, DHHS, and then it has a 30-day public notice. And like I said, it has a hearing to hear from the medical profession, you know, some of us, the public. And then it will go to the AG's Office, will kind of get-- go under scrutiny on whether it follows what we have in statute on certain things that we would like them to address, make sure it doesn't go against anything that we have put in statute. If it does-- if it doesn't or if he doesn't think the language is right, they send it back and they work on it some more. After it goes through the AG's, you know, scrutiny, then it goes on to the Governor and PRO. And once he signs it, it becomes law five days after. And from there, it will go to the Secretary of State's Office, where it gets published. So that's kind of the whole-- so it's not like the chief medical officer just decides what the rules are and that's what's going to happen. It has to go through this, this scrutiny and all of these levels of, of procedure in order to actually become law, the new rules and regs. And if they need to amend it, they have to go through the whole same thing again. So it's quite the kind of ordeal in order to do some of these-- the drafting of these rules and regulations. And I did want to touch on just briefly the E clause that some of us have been talking about. The E clause that we do have

on the bill actually does pertain to the whole bill. However, very similar to what we do with our budget, it-- we have in statute, of course, on page 7 of my copy, line 17, beginning October 1, 2023, performing gender-altering procedures for an individual younger--

**KELLY:** One minute.

HANSEN: --than 19 years of age is a violation of Section 17 of this act. So actually the E clause pertains to the bill, but it actually doesn't get the-- it doesn't actually start until October 1 of 2023 before it would actually become a violation. And I think that's to kind of give this process time to evolve, to go-- to, to promulgate the rules and regulations instead of just starting right away. And so we will have some time in between the passage of this bill and October 1 to get some of those rules and regulations in place. So I just wanted to clarify at least that part. And I think Senator Cavanaugh was alluding to that, and that's one of the questions that he asked me, as well. So with that, I'll yield-- thank you, Mr. President.

**KELLY:** Thank you, Senator Hansen. Senator Aguilar, you're welc-recognized to speak.

**AGUILAR:** Thank you, Mr. President. I rise in full support of LB574e, and I think I pretty much had said my peace yesterday, so I'm going to yield my time to Senator Linehan.

KELLY: Senator Linehan, you have 4:43.

LINEHAN: Thank you, Mr. President. And thank you, Senator Aguilar. I'm going to read, because I was actually shocked when I read this stuff this morning. I'm going to read from Planned Parenthood's site, that's on the Web for any teenager to click on. We use the informed consent model. We offer transgender hormone therapy using an informed consent model. That means you need not to participate in any therapy or get a referral to receive your hormone therapy. We support our patients in making a decision that is best for them. Patients in Iowa and South Dakota must be at least 18 years old to qualify for this service. Patients in Minnesota and Nebraska must be at least 16. I don't think I was allowed to date before I was 16. Sixteen years old. You need to bring a parent or guardian for your first visit. What will happen on your first visit? We'll review your medical history, review our informed consent form with you, measure your weight and blood pressure, discuss your transition goals and create a care plan for you, draw a lab test and explain how-- take hormones-- how to take hormones and answer any questions you might have. So it's true, they

hand out hormones to kids who are 16 years old without any therapy. It's nuts. I'll yield the rest of my time to Senator McDonnell.

**KELLY:** Senator McDonnell, you have 2:52.

McDONNELL: Thank you, Mr. President. Thank you, Senator Linehan. I want to thank Senator Kauth for, for bringing this legislation and working with me and others and having good discussions. Also, I want to thank the senators that are opposing this legislation, but that have conducted themselves professionally, diplomatically, maturely during this process. Also, the people from our state that have taken the time, again, to address this issue and disagree with it, but doing it in a, in a mature way and a professional way, because it was helpful. We have a responsibility to the people that elect us. We also have a responsibility to this institution. This institution is bigger than us. We should take the problem serious. We should take the solution serious. But we shouldn't take ourselves that seriously. This isn't easy. It wasn't supposed to be easy. But every one of us decided to run. And they call this the people's house, and it is. But it's also the people's time. We had 820 bills introduced this year. Those bills are important. They're important to the senator that introduced them, they're important to the people that came and testified them-on them, the people that came up with the ideas, the staff that worked on them. And I don't think we've done justice as senators, my seventh year here, making sure that we do our jobs. Again, to those senators that disagree with this legislation and that have done it professionally and politely, maturely, diplomatically, I thank them--

**KELLY:** One minute.

McDONNELL: --because that's part of the process. But for all of us going forward, we have to realize we're not representing ourselves. We're representing the state of Nebraska and the people that live here and that are counting on us. Thank you, Mr. President.

**KELLY:** Thank you, Senator McDonnell. Senator Holdcroft, you're recognized to speak.

HOLDCROFT: Thank you, Mr. President. I'd like to read the transcript from the Rosiedidyaknowzie program from May 15, 2023. This was presented by Jim Rose on KFAB, and was entitled Impressionable Children and Gender Dysphoria. Please meet Chloe Cole-- and I encourage you to look her up on the web, she has a great story to tell. She is almost now 18. At 11, as is most every 11-year-old, she was confused and she spent too much time on social media. One day she

read an Instagram post from an LGBTQ website. It welcomed, it welcomed the impressionable Chloe in with questions that she'd been asking herself. So she clicked, she clicked it on. Suddenly, an algorithm targeted Chloe. Every day, more and more information about gender dysphoria came to Chloe. It made it sound very normal. Pretty soon she was getting messaged by others, unclear who and what they were, other kids, maybe bots, even adults. But they left Chloe with the impression there were lots of Chloe's, girls who think they may very well be boys. So she told her parents and teachers. They listened then acted, turned her questions into confirmation, began administering puberty blockers and cross-sex hormones to turn her into a boy. She changed her name to Leo. By age 15, she had undergone a radical double mastectomy. Her breasts were gone forever. But modern chemicals, poisons and surgery can't beat the brain and the heart. Even at 15, Chloe knew something was terribly wrong, so she stood up for herself and stopped what she could. Today, now almost 18, is certainly she's a woman-- is certain she's a woman. Each day she must valiantly try to reverse these chemicals' results, but must live with the promise she is at the highest risk for cervical cancer now. And because of the surgery, she must live with the permanent consequences of the action taken by the adults in her life. Infertility is virtual guaranteed. Chloe Cole is at the heart of Nebraska's LB574, to be debated and voted one final time, likely this week. Lost in this emotional narrative about transgenderism, sexual dysfunction, discrimination, intolerance, even economic sabotage is an appalling lack of time spent on facts. We are told by the loudest voices, parroted almost universally by the Nebraska news media, implying and inferring these blockers and hormone treatments are safe. We don't know that. Dr. Michael Laidlaw, a respected endocrinologist in California, a leader in this field, has gone public with the facts. There has been very little research done in this area of modern medicine, no controlled studies. There is no test for gender, no blood test, MRI, genetic testing. The advocates are small groups of very few people who lodge them-- who lodged theories that somehow turned into best practices. We do know this: these chemical treatments affect a small part of the brain that is called the pituitary gland, which controls your sex organs. Once artificially stopped, this natural process of boys to men and girls to women, only harmful things happen. Hormone blockers reduce bone density, which for the rest of your life makes you vulnerable to orthopedic maladies. Suicide rates is the most reverberated argument favoring gender reassignment freedoms. Claims rates are spiking among gender-confused children. There are no credible statistics to back that up. For decades, we have studied teen

suicide. That data is clear. Bullying, coupled with difficult at home life and isolation, most drives teenagers to kill themselves.

**KELLY:** One minute.

HOLDCROFT: Gender dysphoria is only a factor if that child also suffers from an uncaring family, is bullied and has no support networks. The conclusion is don't change a suicidal— don't change a suicidal child's sex, get them therapy. Now from where— now from where has all of this come? Social influence. If 99 percent of us easily identify as either a male or female, why are children flooded with messages saying you might not be what you are or are not? Certainly not science, propaganda. It's become a social contagion in today's culture of isolation. Kids react to what they see and read on social media. They join, join chat rooms to belong and then get coached. We know you're confused, and there's— and here's how you can fix it. Parents are duped. They buy into it out of, out of a desire to make their child happy. According to the Hastings report—

KELLY: That's your time, Senator.

HOLDCROFT: Thank you, Mr. President.

**KELLY:** Thank you, Senator Holdcroft. Senator Dungan, you're recognized to speak.

DUNGAN: Thank you. Colleagues, we're getting down here to the wire, and I just want to make sure that I highlight a couple of other points before we, we go forward on a vote with this. First of all, the conversation we've been having with regards to this delegation of authority, again, it's very important folks think about that before moving forward. I understand that Senator Hansen got up and kind of explained what he believes the process would be hypothetically if this were going through DHHS. But at the end of the day, the bill is silent as to the process and procedure that would be followed in order for these rules to be promulgated. What I know is that based on the case law that has been reviewed, the case law from Nebraska, where they have multiple times found delegations of authority to be improper, it is almost always when it is vague, when there is no limit on time, when it's indefinite, when it's unclear, when it's indeterminate, when it's obscure, and when there's not reasonable limitations. That all applies in this case, colleagues. We don't have in this case any particular barriers to prevent the CMO from promulgating rules, essentially law, dictating what can and can't be done in order to receive treatment. And that is an improper delegation of authority.

We've had this amendment for four days, I believe. And so again, I would reiterate the point that's been made multiple times. You can vote for this bill, colleagues, and still vote to have the E clause or the emergency clause removed. If this bill passes, the second this is signed, abortion will be illegal the next day. Now, if that's your goal, again, we can disagree, but hospitals have been reaching out to us all day. I know they've talked to you all. Hospitals, doctors, the people who represent those hospitals, doctors, folks who understand that if this goes into effect immediately, it's going to be a huge problem. And so, colleagues, it is possible that you can vote for cloture on this, but not vote for the bill with the E clause. And so I just want to make sure I reiterate that again, and this is not something I'm trying to pull the wool over your eyes about. I'm not trying to dupe you, but please understand that if this goes into effect immediately, we are being contacted right now by doctors and folks who represent the doctors saying what a problem that's going to be. I know this has been an arduous process for a lot of people in here, but it should be. This should be hard. We're sent here to do hard work and we're sent here to make big decisions. And there's nothing that we should take lighter than having the government infringe upon individual rights. And it's something that absolutely is happening in this circumstance. I said it yesterday, I said it before. I'll continue to say it. This is one of the largest infringements on personal rights that we are going to see this entire session. It is the government getting between doctors and patients. And it is hard, I know, for people to hear what's going on out in the Rotunda. But again, it should be. I've sat across from kids who have told me that they're scared. I've sat across from parents who have told me that they're scared. I've talked to children, actual children. I don't know if any of you have sat down and talked to children, but kids who have looked me in the eye and said that this makes them feel like they're hated, this makes them feel like they are not welcome. It makes them feel like they're not allowed to be who they are. Colleagues, we should not be in the business of telling people what they can and can't do with their bodies, and we should not be in the business of stepping between doctors and patients in circumstances like this. This will not stop here. This is not the end of the road. If this passes, this is opening the door to so many things, taking rights away from trans folks in our community who are ostracized, who are treated different. Do you think people would choose to be in a community that folks like you are saying are wrong? No, they're not making that choice at all. They're being themselves, and they're being told by this Legislature that they cannot be themselves. Colleagues, this law is discriminatory on its face. It's discriminatory insofar as it

violates the due process clause. It's discriminatory insofar as it violates the equal protection clause.

**KELLY:** One minute.

DUNGAN: It's discriminatory in so many ways. On its face, it says transgender kids are different, because these medications can be used for cisgender kids and they can't be used for transgender kids. This law is discriminatory. We should not be in the business of telling people what to do with their bodies. And colleagues, I'm asking you to dig deep and make a hard choice. I understand this is going to be an incredibly hard decision for a lot of you, but Harvey Milk said one time, It takes no compromise to give people their rights. It takes no money to respect the individual. It takes no political deal to give people freedom, and it takes no survey to remove repression. It doesn't take anything to let people live and let people make decisions about their own bodies. And that's all I'm asking you to do today, colleagues, is let people live and trust people to make the right decisions for themselves. Thank you, Mr. President.

**KELLY:** Thank you, Senator Dungan. Senator Cavanaugh, please state your point of inquiry.

M. CAVANAUGH: I believe that we had a inappropriate yielding of time on yielded time. Could you just clarify for the record?

**KELLY:** The correct rule would be that members speaking from the queue are allowed to yield their time to a second senator, but that second senator is not allowed to yield that time to a third senator during that speaking opportunity.

M. CAVANAUGH: Thank you for the clarification.

**KELLY:** You're welcome, Senator. Mr. Clerk, you have a motion on your desk?

**CLERK:** I do, Mr. President. Senator Kauth would move to invoke cloture on LB574 pursuant to Rule 7, Section 10.

**KELLY:** Senators, please find your seat. We are on Final Reading. Senator Kauth, for what purpose do you rise?

KAUTH: Thank you, Mr. President. I rise to invoke cloture on LB574.

KELLY: Senators--

KAUTH: Roll call vote, regular order, please.

**KELLY:** Thank you. Senators, the first vote is on the motion to invoke cloture. All those in favor vote aye; all those opposed vote nay. Request for a roll call vote. Mr. Clerk.

CLERK: Senator Aguilar voting yes. Senator Albrecht voting yes. Senator Arch voting yes. Senator Armendariz voting yes. Senator Ballad voting yes. Senator Blood not voting. Senator Bosn voting yes. Senator Bostar voting no. Senator Bostelman voting yes. Senator Brandt voting yes. Senator Brewer voting yes. Senator Briese voting yes. Senator John Cavanaugh voting no. Senator Machaela Cavanaugh voting no. Senator Clements voting yes. Senator Conrad voting no. Senator Day voting no. Senator DeBoer voting no. Senator DeKay voting yes. Senator Dorn voting yes. Senator Dover voting yes. Senator Dungan voting no. Senator Erdman voting yes. Senator Fredrickson voting no. Senator Halloran voting yes. Senator Hansen voting yes. Senator Hardin voting yes. Senator Holdcroft voting yes. Senator Hughes voting yes. Senator Hunt voting no. Senator Ibach voting yes. Senator Jacobson voting yes. Senator Kauth voting yes. Senator Linehan voting yes. Senator Lippincott voting yes. Senator Lowe voting yes. Senator McDonnell voting yes. Senator McKinney voting no. Senator Moser voting yes. Senator Murman voting yes. Senator Raybould voting no. Senator Riepe voting yes. Senator Sanders voting yes. Senator Slama voting yes. Senator Vargas voting no. Senator von Gillern voting yes. Senator Walz voting no. Senator Wayne. Senator Wishart voting no. Senator Blood voting no. Vote is 33 ayes, 15 nays to invoke cloture, Mr. President.

**KELLY:** Cloture is invoked. Members, the next question is the question to return to Select File. All those in favor vote aye; all those opposed vote nay. Record, Mr. Clerk.

**CLERK:** 13 ayes, 33 nays on the motion to return to Select File, Mr. President.

**KELLY:** The amendment— the motion is not adopted. The first vote— the next vote is to dispense with the at-large reading. All those in favor, vote aye; all those opposed vote nay. Record, Mr. Clerk.

**CLERK:** 34 ayes, 7 mays to dispense with the at-large reading, Mr. President.

**KELLY:** The at-large reading is dispensed with. Mr. Clerk, please read the title.

CLERK: [Read title of LB574].

**KELLY:** All provisions of law relative to procedure having been complied with, the question is, shall LB574 pass with the emergency clause? All those in favor vote aye; all those opposed vote nay. Mr. Clerk

CLERK: Voting aye: Senators Aguilar, Albrecht, Arch, Armendariz, Ballard, Bosn, Bostelman, Brandt, Brewer, Briese, Clements, DeKay, Dorn, Dover, Erdman, Halloran, Hansen, Hardin, Holdcroft, Hughes, Ibach, Jacobson, Kauth, Linehan, Lippincott, Lowe, McDonnell, Moser, Murman, Riepe, Sanders, Slama, von Gillern. Voting no: Senators Blood, Bostar, John Cavanaugh, Machaela Cavanaugh, Conrad, Day, DeBoer, Dungan, Fredrickson, Hunt, McKinney, Raybould, Vargas, Walz, Wishart. Not voting: Senator Wayne. Vote is 33 ayes, 15 nays, One excused not voting, Mr. President.

**KELLY:** LB574 passes with the emergency clause. While the Legislature is in session and capable of transacting business, I propose to sign and do hereby sign LB574 with the emergency clause. Mr. Clerk for items.

CLERK: Mr. President, amendments to be printed. Senator Brewer to LB514A. Additionally new L-- A bill, Senator Brewer, LB515A [SIC-LB514A]. A bill for an act relating to appropriations. Appropriates funds to aid in the carrying out the provisions of LB514; and declares an emergency. Mr. President, a priority motion. Senator Briese would move to adjourn the body until Monday, May 22 at 9:00

**KELLY:** Members, you've heard the motion to adjourn. All those in favor say aye. All those opposed, nay. We are adjourned.